Fill in this information to identify your case:	
United States Bankruptcy Court for the: Northern District of Illinois	
	Charles and Charles
Case number (if known):	Chapter you are filing under: Chapter 7
	Chapter 11 Chapter 12 Chapter 13
	* * * * * * * * * * * * * * * * * * *

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

art 1: Identify Yourself		•
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name		
government-issued picturé	HANNAH First name	NA First name
your driver's license or	L Middle name	Middle name
Bring your picture	CAOILI	
with the trustee.	·	Last name
	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
have used in the last 8 years	HANNAH First name	First name
Include your married or maiden names.	Middle name CAOILI	Middle name
	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
CONTENTION OF THE PROPERTY OF		
Only the last 4 digits of your Social Security	xxx - xx - <u>5 4 8 6</u>	xxx - xx
number or federal	OR	OR
Individual Taxpayer Identification number (ITIN)	9 xx - xx	9 xx - xx
	Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer identification number	Write the name that is on your government-iesued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal individual Taxpayer identification number About Debtor 1: HANNAH First name CAOILI Last name HANNAH First name CAOILI Last name Addidle name CAOILI Last name Addidle name CAOILI CA

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Debtor 1 HANNAH	CAOILI	Case number (if known)		
First Name Middle	Name Last Name			
· Paradistration of the Control of t	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
	About Device 1.	About Debtor 2 (apouse Only in a Joint Case):		
Any business names and Employer Identification Numbers (EIN) you have used in	I have not used any business names or EINs.	☐ I have not used any business names or EINs.		
the last 8 years	Business name	Business name		
Include trade names and		Dualifieda Harrie		
doing business as names	Business name	0		
-	Dusiness ridine	Business name		
	EIN	EIN		
	EIN	EIN		
	Supplif V	LIIN		
en e	There was a transfer of the first and the state of the	/ // መቀመራ መመመመመ መመመመመ መመመመመ መመመመመመ መመመመመመ መመመመመመ		
5. Where you live		If Debtor 2 lives at a different address:		
	1890			
	Number Street	Number Street		
	Burton Drive			
	BARTLETT !L 60124			
	City State ZIP Code	City State ZIP Code		
	Cook			
	County	County		
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
	Number Street	Number Street		
	P.O. Box	P.O. Box		
	City State ZIP Code	City State ZiP Code		
6. Why you are choosing this district to file for	Check one:	Check one:		
bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)		
		· · · · · · · · · · · · · · · · · · ·		

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Case number (#known)_

	The chanten of the	Oht-	/F				
	The chapter of the Bankruptcy Code you	for Bank	one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing hkruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.				
	are choosing to file under	☑ Cha	pter 7				
		☐ Cha	pter 11				
		☐ Cha					
e.v	i San 2000 (200 PM) C H. S. Eller P. Margalik Remakt Wilder Moore (In 2020 A. S. San Arabi Arabi Arabi Ar	☐ Cha	pter 13	deriot Mentritanings in our years is reserved	autologia sin monet su niversali, propinci Autologia.	والمعارضة والمرازين والمراجعة والمحافظة والمعارضة المحافظة المحافظة المحافظة المحافظة المحافظة المحافظة	Proced to a suffered and a suffered to these ones, a bottom of the subject to the last three last to the energy
-	How you will pay the fee	loca your subr with I nee App. I rec By la less pay	I court for self, you mitting you a pre-pred to partication for the saw, a just than 150 the fee in	or more detain any pay with our payment or inted address by the fee in for Individuals at my fee bedge may, but 0% of the off in installment	Is about how you in the cash, cashier's on your behalf, you s. installments. If you is to Pay The Filing waived (You may is not required to, icial poverty line thes). If you choose the cashier cashier is you choose the cashier cashier is a second to the cashier in the cashie	may pay. Typicall check, or money our attorney may but choose this operated in the control of th	eck with the clerk's office in your ly, if you are paying the fee order. If your attorney is pay with a credit card or check oftion, sign and attach the ents (Official Form 103A). Ition only if you are filing for Chapter 7 and may do so only if your income is a reamily size and you are unable to pust fill out the Application to Have the with your petition.
	The state of the s						
	Have you filed for bankruptcy within the	☑ No		N. A. N	ANN LANGUE AND		Start Control on the control of the
			District _		When	MM / DD / YYYY	Case number
	bankruptcy within the					MM / DD / YYYY	Case number
	bankruptcy within the					MM / DD / YYYY	
	bankruptcy within the		District __		When	MM / DD / YYYY	Case number
	bankruptcy within the last 8 years? Are any bankruptcy	☐ Yes.	District __		When	MM / DD / YYYY	Case number
	bankruptcy within the last 8 years?		District _		When	MM / DD / YYYY MM / DD / YYYY	Case number
	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an	☐ Yes.	District District		When When	MM / DD / YYYY MM / DD / YYYY	Case number
	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business	☐ Yes.	District _ District _ Debtor _ District _		When When When	MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY	Case number
	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an	☐ Yes.	District District Debtor		When When when when	MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY	Case number Case number Relationship to you Case number, if known
_	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an	✓ Yes. ✓ No ☐ Yes. ✓ No.	District Debtor District Destrict Destrict Does a content of the content of	ne 12. ur landlord obta	When When when when	MM / DD / YYYY	Case number Case number Relationship to you Case number, if known

<u>HANNAH</u>

Debtor 1

CAOILI

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Debtor 1	HANNAH First Name Middle Nan	CAC		Ca	se number (if known)			
	Liezi iaame Wilddie Nau	16	Last Name					
	1							
Part 3:	Report About Any I	Business	es You Own as a So	le Proprietor				
	ou a sole proprietor	No.	🗷 No. Go to Part 4.					
	y full- or part-time ness?	☐ Yes.	Name and location of bu	siness				
	proprietorship is a							
busine	ess you operate as an		Name of business, if any			···		
	fual, and is not a ate legal entity such as		The street was a street of the					
a corp	poration, partnership, or		Number Street	,				
LLC.	have more than one		Transci Circle					
	roprietorship, use a		<u></u>	·				
	ate sheet and attach it petition.							
to uns	pention.		City		State ZIP	Code		
				ox to describe your busine				
			Health Care Busines	s (as defined in 11 U.S.C	. § 101(27A))			
			☐ Single Asset Real Es	state (as defined in 11 U.S	S.C. § 101(51B))			
			☐ Stockbroker (as defin	ned in 11 U.S.C. § 101(53	A))			
			☐ Commodity Broker (a	is defined in 11 U.S.C. §	101(6))			
			None of the above					
			And the control of th	and particular county for their enforcements arranged in any and appropriately served a reconstruction of the Phil	Total Mark and the Control of the Co	**** ** ****** *** *** ****** ***		
Chap Bank are y	tou filing under ster 11 of the struptcy Code and ou a small business	can set most red	appropriate deadlines. If y ent balance sheet, stater	the court must know whe you indicate that you are a nent of operations, cash-fixist, follow the procedure it	small business debt flow statement, and fe	tor, you must ederal incom	t attach vour	
	debtor? For a definition of s <i>mall</i>	☑ No.	I am not filing under Chapter 11.					
busine	ess debtor, see S.C. § 101(51D).	☐ No.	I am filing under Chapter the Bankruptcy Code.	11, but I am NOT a smal	l business debtor acc	ording to the	e definition in	
		TYes.	. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.					
	Ī							
Part 4:	Report if You Own	or Have	Any Hazardous Prop	erty or Any Property	That Needs Imme	diate Atti	ntion	
						<u> </u>		
	ou own or have any	∠ No						
	erty that poses or is ed to pose a threat	☐ Yes.	What is the hazard?					
	minent and							
	fiable hazard to						<u> </u>	
	c health or safety? you own any							
prope	erty that needs		If immediate attention is	needed, why is it needed	4 2			
-	diate attention?		ii iiiiiiediate atteritiori is	rieeded, why is it needed	15 <u></u>			
	ample, do you own able goods, or livestock			<u> </u>				
that m	ust be fed, or a building							
that ne	eeds urgent repairs?							
			Where is the property?	Number Street				
								
				City		State	ZIP Code	

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Det	ntar	1

HANNAH CAOILI

Case number (if known)_____

Dart S

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About	Debtor	1:
-------	--------	----

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required	to	receive a	briefing	about
credit counseling	ı b	െ മലമാ		

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

Ш	am not required	to receive a	briefing about
	credit counseling	because of	· -

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after !

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Del	otor 1 HANNAH CAC	Last Name	Case number (#xm	O(k/l)			
Pa	art 5: Answer These Ques	tions for Reporting Purpos	⊕ \$				
16.	What kind of debts do		rily consumer debts? Consumer del				
	you have?	as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17.					
		money for a business or in-	rily business debts? Business debts vestment or through the operation of the				
		☑ No. Go to line 16c. ☐ Yes. Go to line 17.					
		16c. State the type of debts you	owe that are not consumer debts or bu	isiness debts.			
17.	Are you filing under Chapter 7?	☐ No. I am not filing under Ch	napter 7. Go to line 18.	geradd tei Strint ann canthur (ann) a ruantgarin achthur ann can can ann an maithean Caol Lucigeringth, (agric			
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	Yes. I am filing under Chapt administrative expense No Yes	er 7. Do you estimate that after any exe as are paid that funds will be available to	mpt property is excluded and odestribute to unsecured creditors?			
18.	How many creditors do you estimate that you owe?	✓ 1-49 □ 50-99 □ 100-199 □ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000			
19.	How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	□ \$1,000,001-\$10 million □ \$10,000,001-\$50 million □ \$50,000,001-\$100 million □ \$100,000,001-\$500 million	☐ \$500,000,001-\$1 billion ☐ \$1,000,000,001-\$10 billion ☐ \$10,000,000,001-\$50 billion ☐ More than \$50 billion			
20.	How much do you estimate your liabilities to be?	□ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million	□ \$1,000,001-\$10 million □ \$10,000,001-\$50 million □ \$50,000,001-\$100 million □ \$100,000,001-\$500 million	☐ \$500,000,001-\$1 billion ☐ \$1,000,000,001-\$10 billion ☐ \$10,000,000,001-\$50 billion ☐ More than \$50 billion			
Ρ.	art 7: Sign Below						
Fo	or you	I have examined this petition, a correct.	nd I declare under penalty of perjury tha	it the information provided is true and			
		If I have chosen to file under Chof title 11, United States Code. under Chapter 7.	napter 7, I am aware that I may proceed I understand the relief available under e	, if etigible, under Chapter 7, 11,12, or 13 each chapter, and I choose to proceed			
			nd I did not pay or agree to pay someone and read the notice required by 11 U.S.	e who is not an attorney to help me fill out C. § 342(b).			
		I request relief in accordance w	ith the chapter of title 11, United States	Code, specified in this petition.			
		I understand making a false sta with a bankruptcy case can rest 18 U.S.C. §§ 152, 1341, 1519,	utt in fines up to \$250,000, or imprisonm	ng money or property by fraud in connection ment for up to 20 years, or both.			
		Signature of Debtor 1	actli Signatu	ure of Debtor 2			
		Executed on 05/01/2	. <u>018</u> Execut	ed on			

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Debtor 1 HANNAH First Name Middle Nar	CAOILI Last Name	Case number (# known)_	
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in to proceed under Chapter 7, 11, 12, or 13 available under each chapter for which the notice required by 11 LLS C. 8, 243(b)	this petition, declare that I have inf 3 of title 11, United States Code, ar ie person is eligible. I also certify the	ormed the debtor(s) about eligibility and have explained the relief that I have delivered to the debtor(s)
If you are not represented by an attorney, you do not need to file this page.	knowledge after an inquiry that the inform	nation in the schedules filed with the	e petition is incorrect.
	VINCENT WAGNER Printed name		
	Firm name 2720 S. River Rd Suite 100 Number Street		
	DesPlaines City	IL State	60018 ZIP Code
	Contact phone <u>(312)</u> 415-2469	Email address	vwagner4541@comcast.net
:	6186589 Bar number	IL State	-

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Debtor 1	HANNAH		CAOILI		Case number (if known)	
	First Name	Middle Name	Last Name			

在中央中心的人,我们就是一个大小的人,我们也是一个大小的人,我们也是一个大小的人,我们也是一个大小的人,我们也是一个大小的人,我们也是一个大小的人,我们也是一个大小的人

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page.

The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious acconsequences? No Yes	ction with long-te	rm financial and legal
Are you aware that bankruptcy fraud is a serious crime inaccurate or incomplete, you could be fined or impriso No Yes		bankruptcy forms are
Did you pay or agree to pay someone who is not an at ☐ No ☐ Yes. Name of PersonAttach Bankruptcy Petition Preparer's Notice, De		
By signing here, I acknowledge that I understand the r have read and understood this notice, and I am aware attorney may cause me to lose my rights or property if	that filing a ban	kruptcy case without an
Signature of Debtor 1	Signature of De	btor 2
Date MM / DD / YYYY	Date	MM/ DD/YYYY
Contact phone	Contact phone	***************************************
Cell phone	Cell phone	
Email address	Email addesas	

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Debtor 1			
	First Name	Middle Name	Last Name
Debtor 2			
Spouse, if filing)	First Name	Middle Name	Last Name

☐ Check if this is an amended filing

Official Form 106Sum

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.					
Part 1: Summarize Your Assets					
	Your assets Value of what you own				
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$ 331,500.00				
1b. Copy line 62, Total personal property, from Schedule A/B	\$ 10,641.66				
1c. Copy line 63, Total of all property on Schedule A/B	» 342,141.66				
Part 2: Summarize Your Liabilities					
	Your liabilities Amount you owe				
 Schedule D: Greditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	220 444 60				
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$				
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$ 16,340.82				
Your total liabilities	\$16,340.82				
Part 3: Summarize Your Income and Expenses					
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$ <u>3,405.39</u>				
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$5,750.30				

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Debtor 1

Answer These Questions for Administrative and Statistical Records Part 4: 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 7. What kind of debt do you have? ✓ Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. vour debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 51,326.52 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 on Schedule E/F, copy the following: 0.00 9a. Domestic support obligations (Copy line 6a.) 0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 0.00 9d. Student loans. (Copy line 6f.) 9e. Obligations arising out of a separation agreement or divorce that you did not report as 0.00 priority claims. (Copy line 6g.) 0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) 0.00 9g. Total. Add lines 9a through 9f.

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Fill in this	s information to identify your case and thi	s filing:		
	HANNAH CAOILI			
Debtor 1	First Name Middle Name	Last Name		
Debtor 2 (Spouse, if fill	ing) First Name Middle Name	Last Name		
United State	es Bankruptcy Court for the: Northern District of	f Illinois		
Case numb				
				Check if this is an
				amended filing
Officia	al Form 106A/B			
Sch	edule A/B: Propert	У		12/15
responsil write you Part 1:	ble for supplying correct information. If m ir name and case number (if known). Ans Describe Each Residence, Building	ete and accurate as possible. If two married people fore space is needed, attach a separate sheet to the wer every question. Land, or Other Real Estate You Own or Have est in any residence, building, land, or similar prop	is form. On the top of a	nth are equally any additional pages,
	. Go to Part 2.			
¥ Yes	s. Where is the property?	What is the property? Check all that apply.		
	1890 BURTON	Single-family home	Do not deduct secured cla the amount of any secure	d claims on Schedule D:
1010 _	Street address, if available, or other description	Duplex or multi-unit building	Creditors Who Have Clair	ns Secured by Property.
		☐ Condominium or cooperative ☐ Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
-		Land	\$ 331,500.00	\$ 331,500.00
_	BARTLETT IL 60103	☐ Investment property ☐ Timeshare	Describe the nature of	of vour ownership
7	City State ZIP Code	→ U Timeshare □ Other	interest (such as fee	simple, tenancy by
		Who has an interest in the property? Check one.	the entireties, or a life fee simple	e estate), it known.
(Cook	Debtor 1 only	ice simple	
7	County	Debtor 2 only	Check if this is co	mmunity property
		☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	(see instructions)	mindinty property
		Other information you wish to add about this it	em, such as local	
If you o	wn or have more than one, list here:	property identification number:		
ii you o	wild have more than one, fist here.	What is the property? Check all that apply.	D	
	na	☐ Single-family home	Do not deduct secured cla the amount of any secure	d claims on Schedule D:
1.2.	Street address, if available, or other description	Duplex or multi-unit building	Creditors Who Have Clain	and an experience of the second
		Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
		☐ Land	s.	\$
	,	☐ Investment property	Describe the rest	A
ā	City State ZIP Code	☐ Timeshare ☐ Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
		Who has an interest in the property? Check one.		
_		Debtor 1 only		
C	County	Debtor 2 only Debtor 1 and Debtor 2 only	D Charlester	
		At least one of the debtors and another	Check if this is co (see instructions)	mmunity property
		Other information you wish to add about this item property identification number:	m, such as łocal	

	Case 18-17783	D	ed 06/22/18 Entered 06/22/18 13: ocument Page 12 of 55 Case number (# km	59:03 Desc Main
Debtor 1	HANNAH CAOIL First Name Middle No	.1	Case number (if kin	own)
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
1.3.	Street address, if available,	or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own?
			Manufactured or mobile home	
		· · · · · ·	☐ Land	\$
			☐ Investment property	
	City	State ZIP Code	☐ Timeshare	Describe the nature of your ownership interest (such as fee simple, tenancy by
	•		☐ Other	the entireties, or a life estate), if known.
			Who has an interest in the property? Check one.	
			Debtor 1 only	
	County		Debtor 2 only	
	•		Debtor 1 and Debtor 2 only	Check if this is community property
			At least one of the debtors and another	(see instructions)
			Other information you wish to add about this ite	om such as local
			property identification number:	mi, such as local
		_	u. s	s for names 131 EAG
2. Add	the dollar value of the p	OLIOU April minimus	til of your entries from Part 1, including any entrie here.	→ °
you owr	own, lease, or have legant that someone else drive s, vans, trucks, tractors,	s. If you lease a vehic	est in any vehicles, whether they are registered or cle, also report it on Schedule G: Executory Contracts is, motorcycles	not? Include any vehicles and Unexpired Leases.
4	Yes			
3.1.	Make: Model:	Mercedes C 63	Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.
		2009	Debtor 2 only	Current value of the Current value of the
	Year:	95,924	Debtor 1 and Debtor 2 only	entire property? portion you own?
	Approximate mileage:	33,027	At least one of the debtors and another	
	Other information:		☐ Check if this is community property (see instructions)	\$ 3,175.00 \$ 3,175.00
lf yo	ou own or have more than	one, describe here:		
		Mercedes	Who has an interest in the property? Check one	Do not deduct secured claims or exemptions. Put
3.2		GL 550	Debtor 1 only	the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.
	Model:		Debtor 2 only	
	Year:	2008	Debtor 1 and Debtor 2 only	Current value of the current value of the entire property? portion you own?
	Approximate mileage:	177,343	At least one of the debtors and another	entire property? portion you own?
	Other information:	_	•	\$ 7,634.00 \$ 3,817.00
			☐ Check if this is community property (see instructions)	\$ 7,004.00 \$ 0,017.00

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Debtor 1 HANNAH CAOILI Document Page 13 of 55

Case number (Fishown)

.3.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	
	Model:	Debtor 1 only	the amount of any secure Creditors Who Have Clair	
	Year:	Debtor 2 only	والمرأب المحمولين المحاج وماراه	at kilomen atimo di Libe
		Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Approximate mileage:	At least one of the debtors and another	entile property:	portion you own?
	Other information:		•	•
		Check if this is community property (see instructions)	\$	\$
4.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	aims or exemptions. Put
.т.		Debtor 1 only	the amount of any secure	d claims on Schedule D:
	Model:	Debtor 2 only	Creditors Who Have Clair	ms Secured by Property.
	Year:	Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	At least one of the debtors and another	entire property?	portion you own?
	Other information:			
		Check if this is community property (see instructions)	\$	\$
an N Y	ples: Boats, trailers, motors, persor o es Make:	/s and other recreational vehicles, other vehicles, and access hal watercraft, fishing vessels, snowmobiles, motorcycle accesso Who has an interest in the property? Check one.	Do not deduct secured cla the amount of any secure	d claims on Schedule D:
an N I Y	ples: Boats, trailers, motors, person o es	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured class the amount of any secure Creditors Who Have Clair	d claims on Schedule D: ns Secured by Property. Current value of the
an N Y	ples: Boats, trailers, motors, persono oes Make: Model:	watercraft, fishing vessels, snowmobiles, motorcycle accesso Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
N Y	ples: Boats, trailers, motors, persono oes Make: Model:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured class the amount of any secure Creditors Who Have Clair	d claims on Schedule D: ns Secured by Property. Current value of th
N Y	Make: Other information: Own or have more than one, list her Make:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) The who has an interest in the property? Check one.	Do not deduct secured class the amount of any secure Creditors Who Have Clair	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$
i N I Y	Make: Model: Year: Other information: own or have more than one, list her	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) re: Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$
i N I Y	Make: Other information: Own or have more than one, list her Make:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) re: Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured class the amount of any secure Creditors Who Have Clair	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$ aims or exemptions. Put d claims on Schedule D: ms Secured by Property.
i N I Y	Make: Own or have more than one, list her Make: Make: Model: Model: Model: Model: Model:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) re: Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured class the amount of any secure	d claims on Schedule D: ms Secured by Property. Current value of th portion you own? \$ aims or exemptions. Put d claims on Schedule D: ms Secured by Property.
x <i>am</i> N N Y .1.	Make: Own or have more than one, list her Make: Make: Year: Own delicher information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) re: Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? \$	d claims on Schedulins Secured by Proper Current value of portion you ow \$ aims or exemptions. d claims on Schedulins Secured by Proper Current value of

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Document Page 14 of 55 asse number of mount HANNAH CAOILI Debtor 1

Pa	Describe You	r Personal and Household Items		
Do	you own or have any le	gal or equitable interest in any of the following items?		usion of the past case? below-out-dains
6.	Household goods and	fumishings		 .
	_	ces, furniture, linens, china, ktchemiare		
	□ No			. S.
	Yes. Describe	couch, chairs, bed, dresser, kitchen table, desk	S	800.00
7.	Electronics		_	
	collections; e	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music lectronic devices including cell phones, cameras, media players, games		
	☐ No			
	Yes. Describe	TV, radio, computer cellphone	\$	750.00
8.	Collectibles of value			:
	Examples: Antiques and stamp, coin, o	figurines; paintings, prints, or other artwork; books, pictures, or other art objects; or baseball card collections; other collections, memorabilia, collectibles		
	Yes. Describe		\$	100.00
9.	Equipment for sports a			
	and kayaks;	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes carpentry tools; musical instruments		: :
	No Ves. Describe	violin, piano	\$	800.00
10	Firearms			
	Examples: Pistols, rifles,	shotguns, ammunition, and related equipment		1 3
	☐ Yes. Describe		\$	· · · · · · · · · · · · · · · · · · ·
11	Clothes		~~*	
	Examples: Everyday clot	hes, furs, leather coats, designer wear, shoes, accessories		
	☐ No		to the large	
	Yes. Describe	every day clothes	\$	400.00
12	Jewelry Examples: Everyday jew gold, silver	elry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,		
	No Yes. Describe	ring , earring, watches] s	500.00
13	Non-farm animals			;
	Examples: Dogs, cats, b	irds, horses		
	☐ No		******	
	Yes. Describe	dog, rabbits	\$	200.00
14	Any other personal and	household items you did not already list, including any health aids you did not list	41708	
	☑ No			
	Yes. Give specific		\$	
	information			
15		all of your entries from Part 3, including any entries for pages you have attached imber here	\$	3550-

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Debtor 1

HANNAH CAOILI Middle Name Document

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Last Name

rt 4:	Describe Yo	ur Financial	Assets	

Do	you own or have any le	egal or equitable interest in a	ny of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Examples: Money you h		e, in a safe deposit box, and on hand	when you file your petition	
	☐ No ☐ Yes			Cash:	\$30.00
17.	Deposits of money Examples: Checking, sa and other sin	ivings, or other financial accou nilar institutions. If you have mi	nts; certificates of deposit; shares in ultiple accounts with the same institu	credit unions, brokerage houses, tion, list each.	
	☐ No ☑ Yes		Institution name:		
		17.1. Checking account:			\$
		17.2. Checking account:	Chase Bank		\$4.55
		17.3. Savings account:	Amex		\$65.11
		17.4. Savings account:			\$
		17.5. Certificates of deposit:	480		\$
		17.6. Other financial account:			\$
		17.7. Other financial account:			\$
		17.8. Other financial account:			\$
					Φ
		17.9. Other financial account:			\$
18		or publicly traded stocks investment accounts with broke	erage firms, money market accounts		
	☐ Yes	Institution or issuer name:			
					\$
					. \$
		4.4.10			- \$
19	. Non-publicly traded st an LLC, partnership, a		rated and unincorporated busines	ses, including an interest in	
	☑ No	Name of entity:		% of ownership:	^
	Yes. Give specific information about	shares of Evangel Hor	me Health Service Inc	<u>3_</u> 0%	\$
	them			004	\$
				%	\$

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HANNAH CAOILI

Document

Debtor 1

Vegotiable instruments Von-negotiable instrum	ents are those you can	not transfer to someone by signing or delivering them.	
Ž I No			
Yes. Give specific	Issuer name:		
information about			e
them			\$
			\$
			\$
Retirement or pension Examples: Interests in I		1(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
☑ No	-		
Yes. List each			
account separately.	Type of account:	Institution name:	
	401(k) or similar plan:		\$
	Pension plan:		\$
	IRA:		\$
	Retirement account:		\$
	Keogh:		\$
	Additional account:		
	Additional account.		
			\$
			\$
Your share of all unused Examples: Agreements	prepayments I deposits you have ma		\$\$
Your share of all unused Examples: Agreements companies, or others	prepayments I deposits you have ma	ade so that you may continue service or use from a company	\$\$
Your share of all unused Examples: Agreements companies, or others	prepayments d deposits you have ma with landlords, prepaid	ade so that you may continue service or use from a company	\$\$
Your share of all unused Examples: Agreements companies, or others Mo	prepayments d deposits you have ma with landlords, prepaid	ade so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications	\$
Your share of all unused Examples: Agreements companies, or others	prepayments d deposits you have ma with landlords, prepaid	ade so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications itution name or individual:	\$\$
Your share of all unused Examples: Agreements companies, or others A	prepayments d deposits you have ma with landlords, prepaid Inst Electric: Gas:	ade so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications itution name or individual:	\$\$\$\$\$\$\$\$
Your share of all unused Examples: Agreements companies, or others	prepayments d deposits you have ma with landlords, prepaid Inst Electric: Gas: Heating oil:	ade so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications itution name or individual:	\$\$
Your share of all unused Examples: Agreements companies, or others Mo	prepayments d deposits you have may with landlords, prepaid Inst Electric: Gas: Heating oil: Security deposit on rent	ade so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications itution name or individual:	\$\$\$\$\$\$\$\$
Your share of all unused Examples: Agreements companies, or others Mo	prepayments d deposits you have ma with landlords, prepaid Inst Electric: Gas: Heating oil:	ade so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications itution name or individual:	\$\$\$\$\$\$\$\$
Your share of all unused Examples: Agreements companies, or others A	prepayments d deposits you have may with landlords, prepaid Inst Electric: Gas: Heating oil: Security deposit on rent	ade so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications itution name or individual:	\$\$ \$\$ \$\$
Your share of all unused Examples: Agreements companies, or others A	prepayments d deposits you have may with landlords, prepaid Inst Electric: Gas: Heating oil: Security deposit on rent Prepaid rent:	ade so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications itution name or individual:	\$\$ \$\$ \$\$ \$\$
Your share of all unused Examples: Agreements companies, or others	prepayments d deposits you have may with landlords, prepaid Inst Electric: Gas: Heating oil: Security deposit on rent Prepaid rent: Telephone:	ade so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications itution name or individual:	\$\$ \$\$ \$\$
Your share of all unused Examples: Agreements companies, or others Mo	prepayments d deposits you have may with landlords, prepaid Inst Electric: Gas: Heating oil: Security deposit on rent Prepaid rent: Telephone: Water:	ade so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications itution name or individual:	\$\$ \$\$ \$\$ \$\$
Your share of all unused Examples: Agreements companies, or others A	prepayments d deposits you have may with landlords, prepaid Inst Electric: Gas: Heating oil: Security deposit on rent Prepaid rent: Telephone: Water: Rented furniture:	ade so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications itution name or individual:	\$\$ \$\$ \$\$ \$\$
Your share of all unused Examples: Agreements companies, or others ☑ No ☑ Yes	prepayments d deposits you have may with landlords, prepaid Inst Electric: Gas: Heating oil: Security deposit on rent Prepaid rent: Telephone: Water: Rented furniture:	ade so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications itution name or individual:	\$\$ \$\$ \$\$ \$\$
Your share of all unused Examples: Agreements companies, or others No Yes	prepayments d deposits you have may with landlords, prepaid Inst Electric: Gas: Heating oil: Security deposit on rent Prepaid rent: Telephone: Water: Rented furniture:	ade so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications itution name or individual:	\$\$ \$\$ \$\$ \$\$
Your share of all unused Examples: Agreements companies, or others No Yes	prepayments d deposits you have may with landlords, prepaid Inst Electric: Gas: Heating oil: Security deposit on rent Prepaid rent: Telephone: Water: Rented furniture:	ade so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications itution name or individual:	\$\$ \$\$ \$\$ \$\$
Examples: Agreements companies, or others No Yes	prepayments d deposits you have may with landlords, prepaid Inst Electric: Gas: Heating oil: Security deposit on rent Prepaid rent: Telephone: Water: Rented furniture:	ade so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications itution name or individual: al unit: f money to you, either for life or for a number of years)	\$\$ \$\$ \$\$ \$\$
Your share of all unused Examples: Agreements companies, or others No Yes Annuities (A contract for No	prepayments d deposits you have may with landlords, prepaid Inst Electric: Gas: Heating oil: Security deposit on rent Prepaid rent: Telephone: Water: Rented furniture: Other:	ade so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications itution name or individual: al unit: f money to you, either for life or for a number of years)	\$\$ \$\$ \$\$ \$\$
Your share of all unused Examples: Agreements companies, or others No Yes Annuities (A contract for No	prepayments d deposits you have may with landlords, prepaid Inst Electric: Gas: Heating oil: Security deposit on rent Prepaid rent: Telephone: Water: Rented furniture: Other:	ade so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications itution name or individual: al unit: f money to you, either for life or for a number of years)	\$\$ \$\$ \$\$ \$\$ \$\$ \$\$

Case 18-17783 Doc 1 Filed 06/22/18 Entered 06/22/18 13:59:03 Page 17 of 55_{Case number (if kn)} Document HANNAH CAOILI Debtor 1 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ☐ Yes Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them. 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements Z No Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☑ No Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you Z No Yes. Give specific information Federal: about them, including whether you already filed the returns State: and the tax years. Local: 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☑ No ☐ Yes. Give specific information..... Alimony:

30. Other amounts someone owes you

☐ Yes. Give specific information......

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

🗹 No

Official Form 106A/B

Maintenance: Support:

Divorce settlement: Property settlement: Case 18-17783 Doc 1 Filed 06/22/18 Entered 06/22/18 13:59:03 Desc Main Document Page 18 of 55

Debtor 1	HANNAH CAUILI			Case number (if known)	
	First Name Middle Name	Last Name			
			•		
		•			
	ts in insurance policies				
	les: Health, disability, or lite insurar	nce; health saving	js account (HSA); credit,	homeowner's, or renter's insurance	!
No					
Yes	s. Name the insurance company	Company name:		Beneficiary:	Surrender or refund value:
	of each policy and list its value	رمير		,	^
		AIG IE	RM		\$O
		•			\$
					*
			 		-
32. Any in	terest in property that is due you	from someone	who has died		
		expect proceeds f	from a life insurance polic	cy, or are currently entitled to receiv	e
	y because someone has died.				
☑ No		grammanian mana ana na mana an mana an mana			immount, accordi
Yes	s. Give specific information				
		Lacronomic various rate received the ex-	and the second of the second s		\$
00 Claims			ilad a farrarrié au mada .		
	against third parties, whether o	_		і центанц гог раутіент	
•	res. Accidents, employment dispute	, mourance ciali	ma, or ngms to sue		
☑ No			Company and the second		normatic proper remains the
∟ Yes	s. Describe each claim				Andrew of the Control
		L			*
	contingent and unliquidated clair	ns of every natu	re, including countercl	aims of the debtor and rights	
	off claims				
☑ No		prominent of the Selection to the selection of the Select	payan panggapan kananggapan ang ang panggapan ng panggapan panggapan panggapan na manggapan na manggapan na ma	ithus emit, santantuutemineksisteksen suum saa, esimen kaussa suumaassi monaan emit silaan sansa sa sa. Sa	andrew to the control of the control of
☐ Yes	s. Describe each claim				
		AND STATE OF THE PROPERTY IS A PROPERTY OF THE STATE OF T	AND CONTRACTOR IN THE STATE AND	THE PARTY OF THE P	
o= A C		. Dat			
	ancial assets you did not alread				
☑ No		provide com a consecutation of the consecutation of	endra valenda a reviene estro, entroveno estro de la unitario de la compositione de la compositione de la comp	OFFICE AND AND ASSESSED ASSESSED AND ASSESSED ASSESSEDANCE ASSESSED ASSESSE	
☐ Yes	s. Give specific information				S
			CONT. THE CONTRACT OF THE CONT	e entre matematica de manifestro e sucurido estado e estado estado estado de matematica de matematic	أ ســــــــــــــــــــــــــــــــــــ
oc Addith	e dollar value of all of your entri	o from Dort A in	naludina any antrias fa	r nagas you have attached	
	t 4. Write that number here	,	~ -		→ 1s 99.66
10. 7 4.					<u> </u>
	_				
Part 5:	Describe Any Business-	Related Prop	perty You Own or	Have an interest in. List a	nv real estate in Part 1.
37. Do you	own or have any legal or equita	ble interest in an	ny business-related pro	perty?	
☑ No.	Go to Part 6.				
	s. Go to line 38.				
- 100	s. CO to line 30.				
					Current value of the
					portion you own?
					Do not deduct secured claims or exemptions.
00 4	ata annahirahla ay sasasitasi				
	nts receivable or commissions ye	ou aiready earne	3 a		
☑ No		anna na saona manasana na saona na manasana da ana saona na annana na saona na saona na saona na saona na saon	timus attaus vie tati austalivas estati ustastrigustas eta gipira austa (stava), pipi	en (All September 1988) de la companya de la compa	erm as inmadritivening
Yes	s. Describe				
		en a same en participa proportion de la compansión de la	things and the experimental program in the subsequence and the subsequence are not considered to the subsequence of the subsequ		\$
39. Office	equipment, furnishings, and sup				
		•	s, copiers, fax machines, rug	s, telephones, desks, chairs, electronic d	evices
☑ No	•	·			
	s. Describe	el Lovariero i a silvet de Milliano, con tratación de la compresentación de la compresen	t 1986 de la manifestit de mética de la company de communicación des anticas de la company de communicación de	PERSONALE MERCENIA PER A PERSONAL DE SONO COMPA A MERCENTA DE LA PARCE DE COMPA DA LA LA UNIVERSIDA A DESCRIPCIÓN DE COMPA DE LA PERSONAL DEL PERSONAL DE LA PERSONAL DE LA PERSONAL DEL PERSONAL DE LA P	THE REAL PROPERTY AND ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE PER
— ⊤€3	J. Describe				\$
	Proposition and an experience and appropriate			en parameter para interes a prompo por portuguido de la composição do la composição de la c	Winnershood of the Control of the Co

Page 19 of 55_{Case number (# known)} HANNAH CAOILI Debtor 1 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade ☑ No ☐ Yes. Describe..... 41. Inventory ✓ No. Yes. Describe.. 42. Interests in partnerships or joint ventures ☑ No Yes. Describe...... Name of entity: % of ownership: 43. Customer lists, mailing lists, or other compilations **∡** No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? ☐ No ☐ Yes. Describe...... \$ 44. Any business-related property you did not already list □ No Yes. Give specific information 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? Mo. Go to Part 7. Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish ✓ No Yes.....

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Document

Case 18-17783 Filed 06/22/18 Entered 06/22/18 13:59:03 Page 20 of 55_{Case number (if known)} Document HANNAH CAOILI Debtor 1 48. Crops-either growing or harvested Z No ☐ Yes. Give specific information..... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade ☐ Yes..... 50. Farm and fishing supplies, chemicals, and feed ✓ No ☐ Yes... 51. Any farm- and commercial fishing-related property you did not already list **☑** No Yes. Give specific information..... 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership **☑** No ☐ Yes. Give specific information..... 54. Add the dollar value of all of your entries from Part 7. Write that number here Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 56. Part 2: Total vehicles, line 5 57. Part 3: Total personal and household items, line 15 58. Part 4: Total financial assets, line 36 59. Part 5: Total business-related property, line 45 60. Part 6: Total farm- and fishing-related property, line 52 61. Part 7: Total other property not listed, line 54 Copy personal property total → +\$ 10 LULE 66 62. Total personal property. Add lines 56 through 61. 63. Total of all property on Schedule A/B. Add line 55 + line 62.

Doc 1

Cas	se 18-17783	Doc 1	Filed 06/22/18 Document	B Entered Page 21	06/22/18 13:59:0 of 55	03 Desc Main	
Fill in this i	nformation to ider	itify your case		-			
Debtor 1	Hannah Caoili						
Debtor 2 (Spouse, if filing	First Name	Middle Na Middle Na					
United States	Bankruptcy Court for	the: Northern D	strict of Illinois				
Case numbe (If known)							Check if this is an amended filing
Scheo Be as comple Using the pro space is need	te and accurate as perty you listed on	The Pr possible. If two Schedule A/B: ch to this page	married people are fi Property (Official Forn	ling together, both	n as Exem n are equally responsible r source, list the property age as necessary. On the	- for supplying correct infi that you claim as exemp	ot. If more
specific doll of any applic retirement fu limits the ex	ar amount as exentable statutory limings in the unli	npt. Alternativ it. Some exem mited in dolla cular dollar an	ely, you may claim tl ptions—such as tho r amount. However, i nount and the value (he full fair marke se for health aid f you claim an e	the exemption you claim It value of the property to Its, rights to receive certa Ixemption of 100% of fair Ixed determined to exceed to	peing exempted up to a ain benefits, and tax-ear r market value under a	the amount xempt law that
Part 1:	Identify the Pro	perty You Cl	aim as Exempt				
🗹 You	-	and federal non	ng? Check one only, of bankruptcy exemption 11 U.S.C. § 522(b)(2)	•			

	Copy the value from Schedule A/B	Check only one box for each exemption.	
90 Burton Bartlett	\$ <u>331,500.00</u>	Ø \$ <u>15,000.00</u>	735 ILCS 5/12 901
		☐ 100% of fair market value, up to any applicable statutory limit	
usehold goods	\$800.00	□ \$	735 ILCS 5/121001(b)
<u>-</u>		✓ 100% of fair market value, up to any applicable statutory limit	
ctronics	<u>\$ 750.00</u>	_ \$	735 ILCS1001(b)
<u> </u>		√2 100% of fair market value, up to any applicable statutory limit √2 100% of fair market value, up to any applicable statutory limit √3 100% of fair market value, up to any applicable statutory limit √4 100% of fair market value, up to any applicable statutory limit √4 100% of fair market value, up to any applicable statutory limit √5 100% of fair market value, up to any applicable statutory limit √6 100% of fair market value, up to any applicable statutory limit √7 100% of fair market value, up to any applicable statutory limit √8 100% of fair market value, up to any applicable statutory limit √8 100% of fair market value, up to any applicable statutory limit √8 100% of fair market value, up to any applicable statutory limit √8 100% of fair market value, up to any applicable statutory limit √8 100% of fair market value, up to any applicable statutory limit √8 100% of fair market value, up to any applicable statutory limit √8 100% of fair market value st	
•	•	s filed on or after the date of adjustment.)	
uire the property covered I	by the exemption within	1,215 days before you filed this case?	
	nt on 4/01/19 and every 3	sectionics \$750.00 homestead exemption of more than \$160,375? nt on 4/01/19 and every 3 years after that for case	any applicable statutory limit usehold goods \$800.00

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Debtor 1

Hannah Caoili

First Name Middle Name

Last Name

Case number (if known)_

Part 2:

Additional Page

Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	Mercedes C63	\$3,175.00	∡ \$ 2,400.00	735 ILCS 5-212 1001(c)
Line from Schedule A/B:	3.10		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	everyday clothes	\$ 400.00	□ \$ <u>400.00</u>	735ILCS1001(a)(e)
Line from Schedule A/B:	3.11		√ 100% of fair market value, up to any applicable statutory limit √ 100% of fair market value, up to any applicable statutory limit √ 100% of fair market value, up to any applicable statutory limit √ 100% of fair market value, up to any applicable statutory limit √ 100% of fair market value, up to any applicable statutory limit √ 100% of fair market value, up to any applicable statutory limit √ 100% of fair market value, up to any applicable statutory limit √ 100% of fair market value, up to any applicable statutory limit √ 100% of fair market value √ 100% of fair market √ 1	
Brief description: Line from	money in wallet	\$ 30.00	\$ 30.00 100% of fair market value, up to	735 ILCS1001(b)
Schedule A/B:			any applicable statutory limit	
Brief description:	money in bank	\$69.66	 ∮ \$ 69.66 □ 100% of fair market value, up to	735 ILCS1001(b)
Line from Schedule A/B:	3.17		any applicable statutory limit	
Brief description:	jewelry	\$500.00	500.00 \$ 500.00 □ 100% of fair market value, up to	735 ILCS1001(b)
Line from Schedule A/B:	3.17		any applicable statutory limit	
Brief description:		\$	- \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	<u> </u>	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief		\$	·	
description: Line from Schedule A/B:		Y	100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	- \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief	<u> </u>	S		
description: Line from Schedule A/B:		·	100% of fair market value, up to any applicable statutory limit	
· · · · · · ·				

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	Document 1 age 25 of 55			
Fill in this information to identify your case	9:			
Patron Hannah Caoili				
Debtor 1 First Name Middle N	ame Last Name			
Debtor 2 (Spouse, if filing) First Name Middle N	arne Last Name			
United States Bankruptcy Court for the: Northern	District of Illinois			
Case number (if known)			☐ Check i	
			amende	ed tiling
Official Form 106D				
	. Wha Have Oleims Coass	ad bar Daa		
Schedule D: Creditors	s Who Have Claims Secur	ea by Prop	erty	12/15
Be as complete and accurate as possible.	If two married people are filing together, both are e	qually responsible fo	or supplying correct	t anv
additional pages, write your name and cas	r the Additional Page, fill it out, number the entries, e number (if known).	and attach it to this	torin. On the top or	ally
Do any creditors have claims secured b No Check this boy and submit this form	y your property? n to the court with your other schedules. You have noth	ing else to report on t	his form	
Yes, Fill in all of the information below.	To the court with your other schedules. Too have not	ing else to report on t	ins ioin.	
Part 1: List All Secured Claims				
2 I jet all secured claims If a creditor has m	ore than one secured claim, list the creditor separately	Column A	Column B	Column C
for each claim. If more than one creditor h	as a particular claim, list the other creditors in Part 2.	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
As much as possible, list the claims in alph	abetical order according to the creditor's name.	value of collateral.	claim	if any
2.1 Arvest Central Mortgage Co.	Describe the property that secures the claim:	\$327,844.60	s 331,500.00	\$
Creditor's Name 801 John Barrow Rd #1	1890 Burton Bartlett IL			
Number Street	L			
Little Rock AR 72205	As of the date you file, the claim is: Check all that apply			
	☐ Contingent ☐ Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
Debtor 1 and Debtor 2 only At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a	Other (including a right to offset)			
community debt				
Date debt was incurred	Last 4 digits of account number		**************************************	
Mercedes Benz Financial Serv.	Describe the property that secures the claim:	\$600.00	\$3,175.00	\$
36455 Corporate Drive	2009 Mercedes			
Number Street		ا		
Elgin HE GOTZS FARMINGTON	As of the date you file, the claim is: Check all that apply Contingent			
1-/11 LS M1 48331	✓ Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
Debtor 2 only Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)	-		
community debt				
Date debt was incurred	Last 4 digits of account number			

Add the dollar value of your entries in Column A on this page. Write that number here:

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Debtor 1

Hanna	ah :	റമറ	ili

First Name

Last Name

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Case number (#.

Column A Column B Column C Additional Page Amount of claim Value of collateral Unsecured Part 1: After listing any entries on this page, number them beginning with 2.3, followed that supports this portion Do not deduct the by 2.4, and so forth. claim value of collateral. If any 600.00 7,634.00 Glenview State Bank Describe the property that secures the claim: Creditor's Name 800 Waukegan Rd 2008 Mercedes Glenview IL 60025 As of the date you file, the claim is: Check all that apply. Contingent ZIP Code Unliquidated Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only Judgment lien from a lawsuit At least one of the debtors and another Other (including a right to offset). Check if this claim relates to a community debt Last 4 digits of account number Date debt was incurred Describe the property that secures the claim: Creditor's Name Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated ZIP Code □ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. ☐ Debtor 1 only An agreement you made (such as mortgage or secured) Debtor 2 only car loan) Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) Check if this claim relates to a community debt Last 4 digits of account number Date debt was incurred Describe the property that secures the claim: Creditor's Name Number As of the date you file, the claim is: Check all that apply. Contingent State ZIP Code ■ Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured car loan) Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only Judgment lien from a lawsuit At least one of the debtors and another Other (including a right to offset) Check if this claim relates to a community debt Last 4 digits of account number_ Date debt was incurred Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

Case 18-17783 Doc 1 Filed 06/22/18 Entered 06/22/18 13:59:03 Desc Main Fill in this information to identify your case: Hannah Caoili Debtor 1 First Name Middle Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). **List All of Your PRIORITY Unsecured Claims** Part 1: 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☐ Yes 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Priority Nonpriority amount amount 2.1 Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply Contingent State ZIP Code Unfiguidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt Claims for death or personal injury while you were intoxicated Is the claim subject to offset? Other, Specify □ No Yes Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent ☐ Unliquidated Disputed Who incurred the debt? Check one Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only

☐ No☐ Yes

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

At least one of the debtors and another

Check if this claim is for a community debt

Taxes and certain other debts you owe the government

Claims for death or personal injury while you were

Domestic support obligations

intoxicated

Other, Specify

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Debtor 1

Hannah Caoili

Document Page 26 of 55ase number (if known)_____

Your PRIORITY Unsecured Claims — Continuation Page Part 1: After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth. Nonpriority **Total claim** Priority amount amount Last 4 digits of account number _ Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. ☐ Contingent ■ Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only Domestic support obligations Taxes and certain other debts you owe the government Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury white you were intoxicated Check if this claim is for a community debt Other, Specify is the claim subject to offset? □ No ☐ Yes Last 4 digits of account number ___ __ __ Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent ZIP Code Unliquidated ■ Disputed Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only ■ Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated ☐ Check if this claim is for a community debt Other, Specify is the claim subject to offset? ☐ No Yes Last 4 digits of account number ____ ___ Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated ZIP Code State City ☐ Disputed Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated Check if this claim is for a community debt ☐ Other. Specify Is the claim subject to offset? ☐ No ☐ Yes

Filed 06/22/18 Entered 06/22/18 13:59:03 Desc Main Case 18-17783 Doc 1 Hannah Caoilí Document Page 27 of 55Case number (if known) Debtor 1 Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim Capital One Bank Last 4 digits of account number 4 6 4 8 2,209.70 Nonpriority Creditor's Name 01/01/2016 When was the debt incurred? PO Box 6492 60197 Carol Stream IL As of the date you file, the claim is: Check all that apply. Contingent Who incurred the debt? Check one. ☑ Unliquidated Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only At least one of the debtors and another Student loans Obligations arising out of a separation agreement or divorce ☐ Check if this claim is for a community debt that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts Other Specify credit card ₩ No

Yes 120.58 Last 4 digits of account number Comenity-New York 01/01/2016 When was the debt incurred? Nonpriority Creditor's Name PO Box 659728 Number Street As of the date you file, the claim is: Check all that apply. San Antonio TX 78265 State Contingent Unliquida
Disputed Unliquidated Who incurred the debt? Check one Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts is the claim subject to offset? Other. Specify <u>credit card</u> **☑** No Yes Comenity-Express Last 4 digits of account number __ <u> 1 _3 _5 _9</u> 660.05 Nonpriority Creditor's Name 01/01/2016 When was the debt incurred? PO Box 659728

TX 78265 San Antonio As of the date you file, the claim is: Check all that apply. ZIP Code State Contingent Who incurred the debt? Check one. ☑ Unliquidated Debtor 1 only Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts ₩ No Other, Specify credit card Yes

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Debtor 1

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

listing any entries on this page,	number the	em beginning with	4.4, followed by 4.5, and so forth.	Total cla
Slate		,	Last 4 digits of account number 4 9 4 8	\$ <u>3,675</u>
Nonpriority Creditor's Name PO Box 15123			When was the debt incurred? 01/01/2016	
Number Street Wilmington	DE	19850	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent ☑ Unliquidated	
Who incurred the debt? Check one.			Disputed	
Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student Icans	
At least one of the debtors and another	ther		\square Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a com	munity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
is the claim subject to offset?			☑ Other Specify credit card	
☑ No □ Yes				
Petland	POTENSIA SANTANIA MATANIA MATA	naissa ta Annaiste na sa shi Annaiste (1930). A ta Annaiste (1946) a ta S	Last 4 digits of account number 2 9 9 8	\$ <u>2,28</u>
Nonpriority Creditor's Name			When was the debt incurred? 01/01/2017	
PO Box 659622 Number Street				
San Antonio	TX	78265	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check one.			☑ Unliquidated ☐ Disputed	
Debtor 1 only				
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and and	ther		☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a com			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Is the claim subject to offset?	mumty debt		Debts to pension or profit-sharing plans, and other similar debts	
No			☑ Other, Specify <u>credit card</u>	
Yes				
VICTORIA'S SECRET	an na transitión a an heira mais emplementa de Culo	·····································	Last 4 digits of account number 7 4 8 5	\$ <u>76</u> 4
Nonpriority Creditor's Name			When was the debt incurred? 01/01/2017	
PO BOX 659728 Number Street				
SAN ANTONIO	TX	78265	As of the date you file, the claim is: Check all that apply.	
City	State	ZiP Code	□ Contingent	
Who incurred the debt? Check one.			 ✓ Unliquidated ☐ Disputed 	
Debtor 1 only	,		- Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and and	thor		Student loans	
			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Check if this claim is for a com	munity debt		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?			☑ Other, Specify <u>CREDIT CARD</u>	
☑ No ☐ Yes				

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

	-	sognining w	ith 4.4, followed by 4.5, and so forth.	Total claii
R US CREDIT CARD/SY	NB		Last 4 digits of account number 6 4 3 0	1 445
PO Box 530939			When was the debt incurred? 01/01/2016	<u>\$ 1,115.</u>
ATLANTA	GA	30353	As of the date you file, the claim is: Check all that apply.	
City Who incurred the debt? Check or ✓ Debtor 1 only	State ne.	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and ar	nother		Type of NONPRIORITY unsecured claim: Student loans	
☐ Check if this claim is for a co is the claim subject to offset? ☑ No ☐ Yes	mmunity dek	ot	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify <u>Credit card</u> 	
OLD NAVY onpriority Creditor's Name	AND THE STATE OF T	TT SANGUART MARTINET AND	Last 4 digits of account number 2 5 8 0	\$ 329.4
PO Box 530942 umber Street			When was the debt incurred? 01/01/2017	
ATLANTA	GA	30353	As of the date you file, the claim is: Check all that apply.	
/ha incurred the debt? Check one I Debtor 1 only I Debtor 2 only	State	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed	
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors and ano			Student loans Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a com the claim subject to offset? No Yes	munity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit card	
LD NAVY VISA	ogsån standaren i senera atama, storikkondera er e	nin filmin kirasi panada me asancas kaspungunin dalah siri sandan ya		**************************************
priority Creditor's Name			Last 4 digits of account number 7 2 0 5	\$ 1,174.04
D BOX 960017			When was the debt incurred? 01/01/2017	
RLANDO	FL State	32896 ZIP Code	As of the date you file, the claim is: Check all that apply.	
o incurred the debt? Check one.	State	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed	
Debtor 1 only Debtor 2 only	,			
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors and anoth			☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a comm	unity debt		you did not report as priority claims	;
ne claim subject to offset? No Ves			□ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify CREDIT CARD	

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Debtor 1

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

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After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim Last 4 digits of account number 8 6 6 3 Target Red Card s 3,502.45 Nonpriority Creditor's Name 01/01/2016 When was the debt incurred? PO Box 660170 Number As of the date you file, the claim is: Check all that apply. 75266 Dallas TX City State ZIP Code Contingent ✓ Unliquidated Who incurred the debt? Check one Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit card Is the claim subject to offset? ₩ No ☐ Yes 4. Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. State ZIP Code Contingent ☐ Unliquidated Who incurred the debt? Check one. ■ Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other Specify_ ☐ No ☐ Yes Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. City Contingent ZIP Code State Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? ☐ Other. Specify_ ☐ No

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Debtor 1

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Part 3:

List Others to Be Notified About a Debt That You Already Listed

Alternative Collection LLC	On which entry in Part 1 or Part 2 did you list the original creditor?
3842 Harlem Rd 341	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	☐ Part 2: Creditors with Nonpriority Unsecured Claim
	Last 4 digits of account number
Buffalo NY 14215 Dity State ZIP Code	
	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber Street	Part 2: Creditors with Nonpriority Unsecured
	Last 4 digits of account number
City State ZIP Code Legament consumers consequences on a disregalación of adulation actualisment and a distriction and adulation and adulation actualisment and adulation actualisment and adulation actualisment actual a	On which entry in Part 1 or Part 2 did you list the original creditor?
lame	
Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
State ZIP Code	Last 4 digits of account number
ками концентрации в выдам посторям постромограния в посторя выполняющих выполняющих в посторям объектор полива Дате	On which entry in Part 1 or Part 2 did you list the original creditor?
red II to	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
City State ZIP Code	Last 4 digits of account number
	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	☐ Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZIP Code	Last 4 digits of account number
	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one): D Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
City State ZIP Code	Last 4 digits of account number
Control of the Contro	
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
	Part 2: Creditors with Nonpriority Unsecured Claims
Dity State ZIP Code	Last 4 digits of account number

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Debtor 1

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Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim	• • •
Total claims	6a.	Domestic support obligations	6a.	\$	0.00
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+\$	0.00
	6e.	. Total. Add lines 6a through 6d.	6e.	\$	0.00
				Total claim	
Total claims	6f.	Student loans	6 f .	Total claim	0.00
Total claims from Part 2	•	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6f. 6g.	Total claim \$ \$	0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority		**************************************	
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other	6g.	**************************************	0.00

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			2 30011101	it rage	33 3. 33
Fill in this	information to ide	ntify your o	ase:		
Debtor	Hannah Caoil	i			
	First Name	Mid	∄e Name	Last Name	
Debtor 2 (Spouse If filing) First Name	Mid	dle Name	Last Name	—
United States	Bankruptcy Court for	the: Northe	rn District of Illinois		
Case numbe					
(If known)			•		☐ Check if this is amended filing
○46 :-:-1	Carra 1000				
	Form 1060	_			
Sched	lule G: Ex	ecute	ory Contra	acts and	I Unexpired Leases 12/15
1. Do you No. Yes List sep exampl	have any executo Check this box and Fill in all of the info parately each person, rent, vehicle lea	ame and ca ory contract lifile this for ormation be on or comp	ese number (if kno ts or unexpired lea m with the court with low even if the cont pany with whom yo	ses? In your other scheracts or leases a	umber the entries, and attach it to this page. On the top of any edules. You have nothing else to report on this form. The listed on Schedule A/B: Property (Official Form 106A/B). The tract or lease. Then state what each contract or lease is for (for m in the instruction booklet for more examples of executory contracts a
	ed leases.	whom you	have the contract	or loons	State what the contract or lease is for
Person	or company with	wnom you	mave the contract	Or lease	State what the Condact of lease is for
2.1 Arves	t Central Mortg	age Co.			Mortgage and promissory note on residence
Name					_ Mongage and promissory note on residence
801 J Number	ohn Barrow Rd: Street	#1			
Little		AR	72205		
City		State	ZIP Code	Company of the Compan	
2.2 Merce	edes Benz Fina	ncial Sen	vice		auto note
Name					
36455 Number	Corporate Driv Street	/e			_
	ington Hills	MI	48331		
City	a. Essymmatical management of the second of	State	ZIP Code	i pri i di santana na manana manan	- Particular in the season of committee the control of the control
2.3 Glen	view State Bank	(_ auto note
Name	A/a				
800 V Number	Vaukegan Rd Street				_
Glen	view	IL	60025		_
City	Harris of the transfer of the second second of the second	State	ZIP Code	the final of the factor as a Physical Co.	
2.4					
Name			•		
Number	Street				_
		~	7/7 0 - 1		
City	aminte antes no an surrementation and co	State	ZIP Code	eran de view reise ar resonant rei	an kang 199 km si mmemen ngan kong kang sengan pagan kalamangan dan ngangkang Salama. Malahan <mark>ngangan ngan</mark> ang kalamat mengan kang kang mengan salam selam selam kang mengan kang kang selam selam selam selam selam kang selam kang selam se
2.5					_
Name	·				
Number	Street				_
C#-		Chain	ZIR Codo		_
City		State	ZIP Code		

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		Doca	πισπ ταξ	JC 34 01 33	
Fill in	this information to identif	y your case:			
Debto	Hannah Caoili			·	
Depio	First Name	Middle Name	Last Name		
Debto (Spous	r 2 e, if filing) First Name	Middle Name	Last Name		
United	States Bankruptcy Court for the	· Northern District of II	linois		
_		, , , , , , , , , , , , , , , , , , , ,			
(If kno	number wn)				☐ Check if this is an
					amended filing
Offic	cial Form 106H				
		Oadabia			4040
<u>SCI</u>	nedule H: You	r Codebto	5		12/15
1. De 2. W	umber (if known). Answer o you have any codebtors? No Yes fithin the last 8 years, have rizona, California, Idaho, Lou No. Go to line 3. Yes. Did your spouse, form No Yes. In which commun	every question. (If you are filing a join you lived in a commulation, Nevada, New liner spouse, or legal equity state or territory did	t case, do not list e unity property sta Mexico, Puerto Rico uivalent live with y	ither spouse as a codebto te or territory? (Commur b. Texas, Washington, and bu at the time?	nity property states and territories include
	Number Street				
	City	State		ZIP Code	
si S S	hown in line 2 again as a c	odebtor only if that p 06D), S <i>chedule E/F</i> (0	erson is a guarant Official Form 106E	tor or cosigner. Make su (F), or Schedule G (Offic Col	ouse is filing with you. List the person re you have listed the creditor on ial Form 106G). Use Schedule D, umn 2: The creditor to whom you owe the debt eck all schedules that apply:
3.1	Arshin Caoili				Schedule D, line 1 & 3
	Name				Schedule E/F, line
	1890 Burton Drive Number Street				Schedule G, line
	Bartlett	IL.		60103	
2.2	City	State		ZIP Code	
3.2	Name	,			Schedule D, line
	Name .				Schedule E/F, line
	Number Street				Schedule G, line
	City	State		ZIP Code	
3.3	•	2.410			
	Name				Schedule D, line
					Schedule E/F, line
	Number Street			-	Schedule G, line
	City	State		ZIP Code	

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Fill in this information to iden	tify your case:			
Debtor 1 Hannah	Caoili			
First Name Debtor 2	Middle Name	Last Name	-	
(Spouse, if filing) First Name	Middle Name	Last Name	-	
United States Bankruptcy Court for the	he: Northern District of Illinois			
Case number			Charleis	Alexa for
(If known)			Check if	
				mended filing optement showing postpetition chapter
			incon	ne as of the following date:
Official Form 106I			MM /	DD / YYYY
Schedule I: Yo	our Income			12/15
If you are separated and your st	pouse is not filing with you, on the top of any additional page	nig jointly, and your spo do not include informat	buse is living with	tor 2), both are equally responsible for you, include information about your spo ouse. If more space is needed, attach a known). Answer every question.
Fill in your employment information.		Debtor 1		Debtor 2 or non-filing spouse
If you have more than one job,				Debtol 2 of Hon-Ining Spouse
attach a separate page with information about additional	Employment status	☑ Employed		D continue
employers.		Not employed		☐ Employed ☐ Not employed
Include part-time, seasonal, or self-employed work.				— Not employed
Occupation may include studer or homemaker, if it applies.	Occupation nt	medical biller		
	Employer's name	Pioneer Healthcare	e Mgt. Inc.	
	Employer's address	2720 South River	Rd	
		Number Street		Number Street
		Suite 233	 	
			L 60018 ZIP Code	City State ZIP Code
				City State ZIP Code
	Day (ann ann lan aite	City State	ZIF CODE	State ZIF Code
	How long employed there	•	ZIF COUR	14 years
Part 2: Give Details Abo	How long employed there		Zii Code	
Estimate monthly income as a spouse unless you are separate	ut Monthly Income of the date you file this form.	a? 14 years If you have nothing to re	port for any line, w	14 years rite \$0 in the space. Include your non-filing
Estimate monthly income as	ut Monthly Income of the date you file this form. ed. have more than one employer	. If you have nothing to re	port for any line, w	14 years rite \$0 in the space. Include your non-filing
Estimate monthly income as a spouse unless you are separate If you or your non-filing spouse below. If you need more space,	ut Monthly Income of the date you file this form. ed. have more than one employer, attach a separate sheet to this	. If you have nothing to re , combine the information s form.	port for any line, w	14 years rite \$0 in the space. Include your non-filing
Estimate monthly income as a spouse unless you are separate If you or your non-filing spouse below. If you need more space,	of the date you file this form. ed. have more than one employer, attach a separate sheet to this	. If you have nothing to re , combine the information s form.	port for any line, wr	14 years rite \$0 in the space. Include your non-filing or that person on the lines For Debtor 2 or
Estimate monthly income as a spouse unless you are separate If you or your non-filing spouse below. If you need more space,	of the date you file this form. ed. have more than one employer, attach a separate sheet to this alary, and commissions (before, calculate what the monthly we	. If you have nothing to re , combine the information s form.	port for any line, wr for all employers for For Debtor 1	14 years rite \$0 in the space. Include your non-filing or that person on the lines For Debtor 2 or

Case 18-17783 Doc 1 Filed 06/22/18 Entered 06/22/18 13:59:03 Desc Main Page 36 of 55 Document Caoili Hannah Case number (if known) Debtor 1 First Name Middle Name For Debtor 1 For Debtor 2 or non-filing spouse 4,506.66 Copy line 4 here..... 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 1,020.56 5a. 5b. Mandatory contributions for retirement plans 5b. 0.00 5c. 5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5d. 5e. Insurance 5e. 5f. Domestic support obligations 5t. 0.00 5g. 5g. Union dues 5h. Other deductions. Specify: ____ 5h. 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. 1,020.56 3,486.10 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total 0.00 monthly net income. 8a 0.00 8b. Interest and dividends 8b. 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce 0.00 settlement, and property settlement. 8c. 0.00 8d. Unemployment compensation 8d. 8e. Social Security 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 0.00 Specify: 8f 0.00 8g. Pension or retirement income 8g. 8h. Other monthly income. Specify: _ 8h. 0.00 0.00 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 10. Calculate monthly income. Add line 7 + line 9. 3,486.10 0.00 3,486,10 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 10. 11. State all other regular contributions to the expenses that you list in Schedule J. include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.

Specify: _______ 11. **+** \$_

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.

Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies

12. \$\\ 3,486.10

Combined monthly income

13, DO	you expect	an increase of	uecrease v	within the y	ear aiter y	ou me mis ic	AFTII F
_	-			_	_		

et en increace or decreese within the year ofter you file this form?

Yes.	Exp	lain

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Fill in this information to identi	fy your case:				
Debtor 1 HANNAH	CAOIL				
First Name	Middle Name Last Name	Check ii tii			
Debtor 2 (Spouse, if filing) First Name	Middle Name Last Name	An ame		•	
United States Bankruptcy Court for the	e: District of			nowing post the following	petition chapter 13 gdate:
Case number (If known)		MM / DE) / YYYY		
Official Form 106J					
Schedule J: Yo	our Expenses				12/15
•			-		_
1. Is this a joint case?	······				
No. Go to line 2. Yes, Does Debtor 2 live in a	a separate household?				
☐ No ☐ Yes. Debtor 2 must	file Official Form 106J-2, Expenses for S	Separate Household of Debtor 2.			
2. Do you have dependents?	□ __ No	Dependent's relationship to	!	Dependent's	Does dependent live
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Debtor 1 or Debtor 2		ige	with you?
Do not state the dependents' names.		CHILD		17	☐ No ☑ Yes
		CHILD		12	☐ No ☑ Yes
		CHILD		11	□ No ☑ Yes
					□ No
					☐ Yes ☐ No
					Yes
Do your expenses include expenses of people other than yourself and your dependents				V ** * · · · · · · · · · · · · · · · · ·	
Part 2: Estimate Your Ong	joing Monthly Expenses				
Estimate your expenses as of yo	our bankruptcy filing date unless you a ankruptcy is filed. If this is a supplem			•	•
Include expenses paid for with n	ion-cash government assistance if you ded it on <i>Schedule I: Your Income</i> (Offi			Your expe	nses
4. The rental or home ownershi any rent for the ground or lot.	p expenses for your residence. Include	first mortgage payments and	4.	\$ 1407.	10
If not included in line 4:					
4a. Real estate taxes			4a.	s 1,283.7	
4b. Property, homeowner's, o	r renter's insurance		4 b.	\$ 126.08	3
4c. Home maintenance, repa	ir, and upkeep expenses		4c.	s 41.67	······································
4d. Homeowner's association	or condominium dues		4d.	s <u>7.33</u>	······································

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Debtor 1

HANNAH FIRENAMA CAOILI Lest Name

Case number (# known)

			Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$_0.00
6	Utilities:		
-	6a. Electricity, heat, natural gas	6a.	s 223. 28
	6b. Water, sewer, garbage collection	6b.	\$ 69.35
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$ 215.31
	6d. Other. Specify:	6d.	\$
7.	Food and housekeeping supplies	7.	\$ <u>740.00</u>
8.	Childcare and children's education costs	8.	s <u>554,97</u>
9.	Clothing, laundry, and dry cleaning	9.	\$ 2.43
10.	Personal care products and services	10.	s <u>133.33</u>
11.	Medical and dental expenses	11.	s 389.70
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	£ 20.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	s <u>250.00</u>
14.	Charitable contributions and religious donations	14,	s 0.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		. ,
	15a. Life insurance	15a.	<u>\$ 88.33</u>
	15b. Health insurance	15b.	s 0.00
	15c. Vehicle insurance	15c.	5.113-15- 131-60
	15d. Other insurance. Specify:	15d.	\$
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	s_0.00
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$ <u>0.00</u>
	17b. Car payments for Vehicle 2	17b.	s_0.00
	17c. Other. Specify:	17c.	\$ <u> </u>
	17d. Other. Specify:	17d.	<u>s – </u>
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$_0.00 <u></u>
19.	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$ <u> </u>
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your incom	ne.	
	20a. Mortgages on other property	20a.	\$ <u>0.00</u>
	20b. Real estate taxes	20b.	s_0.00
	20c. Property, homeowner's, or renter's insurance	20c.	<u>\$ 0.00</u>
	20d. Maintenance, repair, and upkeep expenses	20d.	s <u>0.00</u>
	20e. Homeowner's association or condominium dues	20e.	<u>\$.0.00</u>

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Debtor 1	First Name Middle Name Last Name	Case number (if known)	10.4.10
21. Other. \$	Specify:	21.	+\$
22. Calcula	te your monthly expenses.		
22a. Ad	d lines 4 through 21.	22a.	\$5,750.30
22b. Co	by line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$
22c. Add	l line 22a and 22b. The result is your monthly expenses.	22c.	\$
			Казашка шилинин иниминин техничиндүүлөг канадарга канадарга канадарга улган авардану (
23. Calculate	your monthly net income.		2.480.40
23a. Co	py line 12 (your combined monthly income) from Schedule I.	23a .	\$3,486.10
23b. Co	py your monthly expenses from line 22c above.	23b.	-\$ 5,750.30
23c. Su	btract your monthly expenses from your monthly income.		s -2,264.20
Th	e result is your <i>monthly net income</i> .	23c.	\$
For exam	expect an increase or decrease in your expenses within the year after you findle, do you expect to finish paying for your car loan within the year or do you experies payment to increase or decrease because of a modification to the terms of your Explain here:	pect your r mortgage?	

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Debtor 2 Mode tenner Mode tenner Ges Harm Debtor 2 Mode tenner Ges Harm Ges Harm Debtor 2 Mode tenner Ges Harm Ges Harm Ges Harm Debtor 2 Ges Harm	abba d	Hannah Caoili					
minded States Bankruptcy Court for the: Northern District of fillinois ass number Check if this amended fill fillinois ass number Check if this amended fill fillinois ass number Check if this amended fill fillinois ass number Check if this amended fill fillinois ass number (if known). Answer every question. Common	ebtor 1		Middle Name	Last Name			
### Check if this arriended file in the intervention of the places you lived in the last 3 years, have you lived anywhere other than where you live now? Dates Debtor 1: Dates Debtor 1 Da		First Name	Middle Name	Last Name			
Attended file ficial Form 107 atement of Financial Affairs for Individuals Filing for Bankruptcy is complete and accurate as possible. If two married people are filing together, both are squally responsible for supplying correct rmation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case ber (if known). Answer every question. **T-11** Give Details About Your Marital Status and Where You Lived Before** What is your current marital status? **D Married** During the last 3 years, have you lived anywhere other than where you live now? Married** During the last 3 years, have you lived in the last 3 years. Do not include where you live now. Debtor 1:	ited States I	Bankruptcy Court for the:	: Northern District of	Illinois			
Arement of Financial Affairs for Individuals Filing for Bankruptcy s complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct mation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case beer (if known). Answer every question. It is give Details About Your Marital Status and Where You Lived Before What is your current marital status? Merried Not married During the last 3 years, have you lived anywhere other than where you live now? Merried No Pest. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1: Dates Debtor 1 Debtor 1: Dates Debtor 1 Debtor 2: Dates Debtor 1 Debtor 1: Same as Debtor 1 Debtor 3: Same as Debtor 1 Debtor 5: Same 2IP Code Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property s	se number					_	3
atement of Financial Affairs for Individuals Filing for Bankruptcy s complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct mation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case beer (if known). Answer every question. 11 Give Details About Your Marital Status and Where You Lived Before What is your current marital status? Married	(nown)					L	Check if this is an amended filing
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## Answer every question. ### Give Details About Your Marital Status and Where You Lived Before ### What is your current marital status? ### Married	as comple	te and accurate as p	oossible. If two marr	ied people are filing	together, both are equal	lly responsible for supplyir	ng correct
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Same as Debtor 1 From	☑ No ☐ Yes. I	ist all of the places y		years. Do not include Dates Debtor 1 lived there From	Debtor 2: Same as Debtor 1		Same as Debtor
From	No Yes. I	ist all of the places y	ou lived in the last 3 y	years. Do not include Dates Debtor 1 lived there From	Debtor 2: Same as Debtor 1 Number Street	State ZIP Code	Same as Debtor
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Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community propstates and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)	No Pet	ist all of the places y	ou lived in the last 3	years. Do not include Dates Debtor 1 lived there From To	Pebtor 2: Same as Debtor 1 Number Street City Same as Debtor 1		Same as Debtor From To Same as Debtor From
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18.8 180.8	No Det Nu Nu City	ist all of the places yetor 1: mber Street be last 8 years, did ye	ou lived in the last 3 y State ZIP Code State ZIP Code	pears. Do not include Dates Debtor 1 lived there From To From From pouse or legal equi	Same as Debtor 1 Number Street City Number Street City Valent in a community preserved.	State ZIP Code	Same as Debtor From To Same as Debtor From To Community property
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Tes. Make sale you in our concase 11. Your consisters (chicles a chicles a c	Num Pet Num City Within th states an	ist all of the places yetor 1: The last 8 years, did yed territories include A	State ZIP Code State ZIP Code ou ever live with a srizona, California, Ida	pouse or legal equi	Same as Debtor 1 Number Street City Number Street City Valent in a community proda, New Mexico, Puerto Rich	State ZIP Code	Same as Debtor From To Same as Debtor From To Community property

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_{tor 1} Hannah Caoili			Case nur	mber (if known)	
First Name Middle Name	Last N	ame			
Did you have any income from Filt in the total amount of income If you are filing a joint case and y	e you received	from all jobs and all busi	nesses, including part-tin	ne activities.	ndar years?
Yes. Fill in the details.					
	9 9 9 9 9	DebtorT		Delitor 2	
		Sources of income Check all that apply	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross Income (before deductions a exclusions)
From January 1 of current the date you filed for bank		Wages, commissions, bonuses, tips	§ 31,387.00	Wages, commissions, bonuses, tips	\$
		Operating a business		Operating a business	
For last calendar year:		Wages, commissions, bonuses, tips	s 60,840.00	Wages, commissions, bonuses, tips	q
(January 1 to December 31	, <u>2017</u>)	Operating a business	Ψ	Operating a business	Ψ
en e		₩ages, commissions,			
	ara that:	• .		Wages, commissions, bonuses, tips	•
For the calendar year before		bonuses, tips	\$ 47,733.00		\$
(January 1 to December 31 Did you receive any other inco Include income regardless of wh unemployment, and other public gambling and lottery winnings. If	, 2016) ome during the mether that income benefit payment fyou are filing	is year or the two previous is taxable. Examples ents; pensions; rental income is joint case and you have	ous calendar years? s of other income are alim ome; interest; dividends; e income that you receive	Operating a business nony, child support; Social someoney collected from laws ed together, list it only once	uits; royalties; and
Oid you receive any other inconnection of the income regardless of who unemployment, and other public gambling and lottery winnings. If List each source and the gross in No	, 2016) ome during the mether that income benefit payment fyou are filing	is year or the two previous is taxable. Examples ents; pensions; rental income is joint case and you have	ous calendar years? s of other income are alim ome; interest; dividends; e income that you receive	Operating a business nony, child support; Social someoney collected from laws ed together, list it only once	uits; royalties; and
Oid you receive any other inconstruction of the income regardless of whomeone unemployment, and other public gambling and lottery winnings. If List each source and the gross in	, 2016) ome during the mether that income benefit payment fyou are filing	is year or the two previous is taxable. Examples ents; pensions; rental income is joint case and you have	ous calendar years? s of other income are alim ome; interest; dividends; e income that you receive	Operating a business nony, child support; Social someoney collected from laws ed together, list it only once	uits; royalties; and
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Oid you receive any other inconstruction of the property of th	ome during the nether that income fyou are filing income from each	Operating a business is year or the two previous is taxable. Examples ents; pensions; rental income a joint case and you have ach source separately. Depart i	ous calendar years? s of other income are alimome; interest; dividends; e income that you receive o not include income that Gross income from each source (before deductions and	Operating a business mony, child support; Social services of income.	Gross Income from each source (before deductions
(January 1 to December 31 Did you receive any other inco Include income regardless of wh unemployment, and other public gambling and lottery winnings. If List each source and the gross in	, 2016) come during the nether that income fyou are filing income from each	Operating a business is year or the two previous is taxable. Examples ents; pensions; rental indicates a joint case and you have ach source separately. Depart f	ous calendar years? s of other income are alimome; interest; dividends; e income that you receive o not include income that Gross income from each source (before deductions and	Operating a business mony, child support; Social services of income.	Gross Income from each source (before deductions
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Oid you receive any other inconstruction of the public gambling and lottery winnings. If List each source and the gross in the Yes. Fill in the details.	nt year until	is year or the two previous is taxable. Examples ents; pensions; rental including a joint case and you have ach source separately. Describe the Describe below.	ous calendar years? s of other income are alimome; interest; dividends; e income that you receive o not include income that Gross income from each source (before deductions and exclusions) \$	Operating a business mony, child support; Social services of income.	Gross income from each source (before deductions exclusions) \$
Oid you receive any other inconstruction include income regardless of whomeone includes include income regardless of whomeone includes includ	, 2016) come during the nether that income fyou are filing income from each of the come	is year or the two previone is taxable. Examples ents; pensions; rental including a joint case and you have ach source separately. Describe below.	ous calendar years? s of other income are alimome; interest; dividends; e income that you receive o not include income that Gross income from each source (before deductions and exclusions) \$	Operating a business nony, child support; Social of the money collected from laws and together, list it only once to you listed in line 4. District Sources of Income Describe below.	Gross income fror each source (before deductions exclusions)
Did you receive any other inco Include income regardless of wh unemployment, and other public gambling and lottery winnings. If List each source and the gross in No Pes. Fill in the details. From January 1 of curren the date you filed for ban For last calendar year: (January 1 to December 31	nt year until	is year or the two previous is taxable. Examples ents; pensions; rental including a joint case and you have ach source separately. Depart i	ous calendar years? s of other income are alimome; interest; dividends; e income that you receive o not include income that Gross income from each source (before deductions and exclusions) \$	Operating a business nony, child support; Social of the support o	Gross income fror each source (before deductions exclusions) \$
Did you receive any other inco Include income regardless of wh unemployment, and other public gambling and lottery winnings. If List each source and the gross if No Yes. Fill in the details. From January 1 of curren the date you filed for ban For last calendar year: (January 1 to December 31)	nt year until akruptcy:	is year or the two previous is taxable. Examples ents; pensions; rental including a joint case and you have ach source separately. Depart i	ous calendar years? sof other income are alimome; interest; dividends; e income that you receive o not include income that Gross income from each source (before deductions and exclusions) \$	Operating a business nony, child support; Social of the second of the s	Gross Income from each source (before deductions
Did you receive any other incomplete income regardless of who unemployment, and other public gambling and lottery winnings. If List each source and the gross in No No Yes. Fill in the details. From January 1 of current the date you filed for bank For last calendar year: (January 1 to December 31)	nt year until akruptcy:	is year or the two previous is taxable. Examples ents; pensions; rental including a joint case and you have ach source separately. Depart i	ous calendar years? sof other income are alimome; interest; dividends; e income that you receive o not include income that Gross income from each source (before deductions and exclusions) \$	Operating a business nony, child support; Social of the support o	Gross income from each source (before deductions exclusions) \$

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Hannah Caoili Debtor 1 Case number (if know List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? ☑ No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. 2 Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of Total amount paid Amount you still owe Was this payment for... payment Arvest Central Mortgage 04/01/2018 4,223,10 341,000.00 Mortgage Creditor's Name ☐ Car 801 John Barrow Rd #1 ☐ Credit card Number Street Loan repayment ☐ Suppliers or vendors 72205 Little Rock AR Other City State ZIP Code ■ Mortgage Creditor's Name ☐ Car Credit card Number Street Loan repayment Suppliers or vendors Other City State ZIP Code Mortgage Creditor's Name ☐ Car Credit card Number Street Loan repayment Suppliers or vendors Other ZIP Code

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otor 1	Hannah Caoili			C	ase number (#known)	
	First Name Middle N	arne Last Name				
Insid corpo agen	ers include your relative	usiness you operate as a so	elatives of any g	general parmers; pa cowner of 20% or m	ore of their voting	no was an insider? you are a general partner; securities; and any managing domestic support obligations,
Z	10					
□ /	es. List all payments to	an insider.	_ : .		America very etill	Reason for this payment
			Dates of payment	Total amount paid	OW8	and the same payment
	Insider's Name			\$	\$	
	moladi di Maria				; }	
	Number Street				:	
					:	
	City	State ZIP Code				
			·	\$	\$	
	Insider's Name					
	Number Street					
		447				
	City	State ZIP Code	-			
an i Incl	insider? ude payments on debts No	guaranteed or cosigned by that benefited an insider.		Total amount	Amount you still	n account of a debt that benefited Reason for this payment
			payment	paid	owe	Include creditor's name
				c	\$	•
	Insider's Name			Ф <u></u>	_ Ψ	: :
						:
	Number Street					
	<u></u>					•
	City	State ZIP Code	-			
				and a superior of the second		The control of the co
				\$	_ \$	
	Insider's Name			-		
				_		
	Number Street			-		
				_		
						:
		01-1- 7/D Code	_			

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ebtor 1	Hannah Caoili	Case number	(if known)	
	First Name Middle Name Last Name		<u></u>	
art 4	Identify Legal Actions, Repossession	ons, and Foreclosures		
With		ere you a party in any lawsuit, court action, or	administrative proceed	lina?
		s, small claims actions, divorces, collection suits,		
	contract disputes.			
∑ N	ło			
U Y	es. Fill in the details.			
	Natu	re of the case Court or agency		Status of the case
	f · ·	Control of the Contro	·	
	Case title	T Court Name		— 🗹 Pending
		oosk name		On appeal
		Number Street		Conduded
	:			
	Case number	City	State ZIP Code	
-				
				Pending
	Case title	Court Name		On appeal
		: 		* *
		Number Street		Concluded
	Case number	: :		_
		City	State ZIP Code	
□ Y	es. Fill in the information below.		. •	+ W ₂
		Describe the property	Date	Value of the property
		;	•	
	Creditor's Name	<u></u> ;	<u> </u>	\$
		:		
	Number Street	Explain what happened		
		Property was repossessed.		
		Property was foredosed.		
		Property was garnished.		
	City State ZIP Code	Property was attached, seized, or levie	ed.	
	ting the same representation of the same o	Describe the property	Date	Value of the propert
		The second secon		Tuido di dio proport
		:		_
	Creditor's Name		;	\$
	Creditor's Name		:	
	Number Street			
		Explain what happened		
		Property was repossessed.		
		Property was foreclosed.		
	A).	Property was garnished.		
	City State ZIP Code	_		

Property was attached, seized, or levied.

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Case number (if known)_

ounts or refuse to make a payment bec	ptcy, did any creditor, including a bank or financial institutions.	Oil, set Oil ally a	
40	ause you owed a dest.		
Yes. Fill in the details.			
	Describe the action the creditor took	Date action was taken	Amount
Creditor's Name		- - -	
	: - -	:	\$
lumber Street			
	- ;		
City State ZIP Code	Last 4 digits of account number: XXXX		
No ⁄es			
List Certain Gifts and Contribu	tions		
<u> </u>			
	tcy, did you give any gifts with a total value of more than \$	600 per person?	
	Describe the gifts	Dates you gave	Value
es. Fill in the details for each gift.	Describe the gifts	Dates you gave the gifts	Value
es. Fill in the details for each gift. Gifts with a total value of more than \$600	Describe the gifts		Value
es. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts		Value \$
es. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts		Value \$
es. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts		Value \$ \$
es. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts		Value \$\$
es. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts		Value \$\$
res. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift	Describe the gifts		Value \$\$
Ces. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Jumber Street	Describe the gifts		Value \$\$
Ces. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Jumber Street	Describe the gifts		Value \$\$
Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Jumber Street Sity State ZIP Code Person's relationship to you Sifts with a total value of more than \$600	Describe the gifts	Dates you gave	Value \$
Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Jumber Street Person's relationship to you Sifts with a total value of more than \$600		the gifts	\$\$
Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Jumber Street State ZIP Code Person's relationship to you Stifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave	\$\$
Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Jumber Street State ZIP Code Person's relationship to you Stifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave	\$Value
Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift State ZIP Code Person's relationship to you Sifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave	\$Value
per person Person to Whom You Gave the Gift Number Street	Describe the gifts	Dates you gave	\$Value
Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift State ZIP Code Person's relationship to you Sifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave	\$Value

Debtor 1

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₋₁ Hannah Caoili	Case number (#known)_		
First Name Middle Name L	ast Name		
	ruptcy, did you give any gifts or contributions with a total valu	e of more than \$60	00 to any charity
No			
Yes. Fill in the details for each gift or co	ontribution.		
Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
that total more than soon	en e	contributed	
		•	
Charity's Name	_; _;	<u> </u>	\$
			¢
	-		Φ
Number Street			
		•	
City State ZIP Code	· · · · · · · · · · · · · · · · · · ·		
5: List Certain Losses			
Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance	Date of your loss	Value of propert lost
	claims on line 33 of Schedule A/B: Property.		
	1		•
	i i		Ψ
	and the second section of the section of the second section of the section of the second section of the	.:	
7: List Certain Payments or Tra	nnsfers		
	ptcy, did you or anyone else acting on your behalf pay or trai	nsfer any property	to anyone
ou consulted about seeking bankruptc nclude any attomeys, bankruptcy petition	y or preparing a parikruptcy petition? preparers, or credit counseling agencies for services required in yi	our bankruptcy.	
⊒ No		. ,	
2 Yes. Fill in the details.			
	Description and value of any property transferred	Date payment or	
Person Who Was Paid		transfer was	Amount of paym
Atty Vincent Wagner	-		Amount of paym
THE THOOLETTAGING	\$1500.00		Amount of paym
Number Street	\$1500.00 -	11/12/2016	•
	\$1500.00 -	· ·	
Number Street 2027 S.River Rd #100	\$1500.00 -	· ·	•
Number Street	\$1500.00 - -	· ·	\$ <u>1,500</u> .
Number Street 2027 S.River Rd #100 Des Plaines IL 60067 City State ZIP Code	\$1500.00 -	· ·	\$ <u>1,500</u> .
Number Street 2027 S.River Rd #100 Des Plaines IL 60067	\$1500.00 - -	· ·	\$ <u>1,500</u> .
Number Street 2027 S.River Rd #100 Des Plaines IL 60067 City State ZIP Code vwagner4541@comcast.net	\$1500.00 -	· ·	\$ 1,500.0

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First Name Middle Name	Last Name	Case number (if known)	
	Description and value of any property trans	sferred Date payment or transfer was made	Amount of
123 Credit Counselors Inc		Manage Machinet	s payment
Person Who Was Paid	counseling fee	05/01/2018	\$ <u> 3</u>
Number Street	; :	· :	
	; :		\$
City State ZIP Code		· ·	
City State 21r Gode	:		
Email or website address		:	
Person Who Made the Payment, if Not You	_ ;		
Person who made the Payment, it not you		erre a company of the	
No Yes. Fill in the details.	Description and value of any property trans	sferred Date payment or	Amount of p
		transfer was made	
Person Who Was Paid	; ;		
Number Street			\$
			\$
	ruptcy, did you sell, trade, or otherwise tra	nsfer any property to anyone, other t	\$han property
ithin 2 years before you filed for bank ansferred in the ordinary course of yo	cruptcy, did you sell, trade, or otherwise transport business or financial affairs? It is made as security (such as the granting of a have already listed on this statement. Description and value of property		roperty).
ithin 2 years before you filed for bank ansferred in the ordinary course of you clude both outright transfers and transfe o not include gifts and transfers that you No	cruptcy, did you sell, trade, or otherwise transport business or financial affairs? It is made as security (such as the granting of a have already listed on this statement. Description and value of property	security interest or mortgage on your property or payments received the second of the	roperty).
ithin 2 years before you filed for bank ansferred in the ordinary course of you clude both outright transfers and transfe o not include gifts and transfers that you No Yes. Fill in the details.	cruptcy, did you sell, trade, or otherwise transport business or financial affairs? It is made as security (such as the granting of a have already listed on this statement. Description and value of property	security interest or mortgage on your property or payments received the second of the	roperty).
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City State ZIP Code	cruptcy, did you sell, trade, or otherwise transur business or financial affairs? In made as security (such as the granting of a have already listed on this statement. Description and value of property transferred	security interest or mortgage on your property or payments received the second of the	roperty).
ithin 2 years before you filed for bank ansferred in the ordinary course of yo clude both outright transfers and transfe o not include gifts and transfers that you No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you Person Who Received Transfer	cruptcy, did you sell, trade, or otherwise transur business or financial affairs? In made as security (such as the granting of a have already listed on this statement. Description and value of property transferred	security interest or mortgage on your property or payments received the second of the	roperty).
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ithin 2 years before you filed for bank ansferred in the ordinary course of yo clude both outright transfers and transfe o not include gifts and transfers that you No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you Person Who Received Transfer	cruptcy, did you sell, trade, or otherwise transur business or financial affairs? In made as security (such as the granting of a have already listed on this statement. Description and value of property transferred	security interest or mortgage on your property or payments received the second of the	roperty).

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Rest Name and the Rest Name an			
d asset-protection devices.)	ty to a seit-settled trus	t or similar device of w	hìch you
Description and value of the prope	rty transferred		Date transfer
	The second secon		was made
			:
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			a.
en oo ah oo ah	Estant Statute I 1920 min 1924 constitute statute estatute e tamantus manuscus es sant minimum antiques.	a riggig rang ryagang ngang ngang at 18 km/hadan silikida badanari ka silikinda 6 km/hada di 18 km/hada s	n - Sillen hande Johnson St. St. William and Joseph St.
ınts, İnstruments, Safe Deposit	Boxes, and Storag	• Units	
ruptcy, were any financial accounts (r instruments held in	your name, or for your	benefit.
		, , ,	
		res in banks, credit un	ions,
peratives, associations, and other fir	nancial institutions.		
			9
Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved.	Last balance befo closing or transfer
	111044	or transferred	oneonig to meno.c.
<u> </u>	-		
XXXX	-		\$
			
	-		
	Other		
xxxx- <u></u>	☐ Checking		\$
	☐ Savings		
	Money market		
	☐ Brokerage		
	Other		
	u Other		
	unts, Instruments, Safe Deposit ruptcy, were any financial accounts o ket, or other financial accounts; cert peratives, associations, and other fir Last 4 digits of account number. XXXX	unts, Instruments, Safe Deposit Boxes, and Storage ruptcy, were any financial accounts or instruments held in the ket, or other financial accounts; certificates of deposit; sha speratives, associations, and other financial institutions. Last 4 digits of account number Type of account or instrument XXXX	Last 4 digits of account number Type of account or instrument Closed, sold, moved, or transferred XXXX

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ebtor 1	Hannah Caoili		Case number (if known)	
	First Name Middle Name	Last Name		
		init or place other than your home wi	ithin 1 year before you filed for bankruptc	y?
ZÍN □y	o es. Fill in the details.			
— 1	es. Fill in the details.	Who else has or had access to it?	Describe the contents	Do you sti
		THIS GOOD HAS OF HAD ACCOSS IN AL	Describe tile contents	have it?
				□ No
	Name of Storage Facility	Name		U No ☐ Yes
	•			
	Number Street	Number Street		:
				1
		CityState ZIP Code		į
	City State ZIP Cod	6		
Part 9:	Identify Property You Ho	eld or Control for Someone Eise		
23. Do y	ou hold or control any property th	at someone else owns? Include any	property you borrowed from, are storing t	for,
or h	old in trust for someone.	•		•
2	No			
U 1	es. Fill in the details.			
		Where is the property?	Describe the property	Value
	Owner's Name			\$
	l	Number Street		:
	Number Street			:
				
	City State ZIP Cod	City State Z	IP Code	:
Part 1	Give Details About Envir	onmental information		
For the	purpose of Part 10, the following	definitions apply:		
	• •	· · ·	oncerning pollution, contamination, relea	ses of
haza	irdous or toxic substances, waste	s, or material into the air, land, soil, s	surface water, groundwater, or other medi	
inclu	Iding statutes or regulations conti	olling the cleanup of these substanc	es, wastes, or material.	
			nental law, whether you now own, operate	a, or
utiliz	ze it or used to own, operate, or ut	ilize it, including disposal sites.		
			ardous waste, hazardous substance, toxi	С
Subs	stance, hazardous material, pollut	ant, contaminant, or similar term.		
Report	all notices, releases, and proceedi	ngs that you know about, regardless	of when they occurred.	
04 Haa.		. Abot b. Babla	. Hallaha	
24. mas 1	any governmental unit notified you	triat you may be liable or potentially	liable under or in violation of an environ	mental law?
ZÍ M	No			
u v	es. Fill in the details.			
		Governmental unit	Environmental law, if you know it	Date of notice
		•		
7	lame of site	Governmental unit	-} -}	
_			ing Section (1997) and the second of the section of	
h	lumber Street	Number Street		
		City Seets 710 Oct	_	
-		City State ZIP Code		

City

State

ZIP Code

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ve you notified any g	overnmental	l unit of any release of hazardous n	nateriai?	
No				
Yes. Fill in the detai	ils.			
		Governmental unit	Environmental law, if you kn	ow it Date of notice
				:
Name of site		Governmental unit	: 	
Hame of one		Softmand ditt		<u> </u>
Number Street		Number Street		
		City State ZiP Co	ode	
City	State ZIP	Code		
			and the second second second second second	er en
ve you been a party i	in any judicia	al or administrative proceeding und	der any environmental law? Inclu	de settlements and orders.
No				
Yes. Fill in the detai	ils.			
		Court or agency	Nature of the case	Status of the case
0				,
Case title		Court Name		Pending
				□ On appe
		Number Street		☐ Conclude
		City State our Business or Connections to bankruptcy, did you own a business		nnections to any business?
Give Details ithin 4 years before y A sole proprieto	ou filed for b or or self-emp imited liabilit	ur Business or Connections to	o Any Business s or have any of the following col her activity, either full-time or par	
Give Details fithin 4 years before y A sole proprieto A member of a l A partner in a pa	ou filed for b or or self-emp imited liabilit artnership	ur Business or Connections to pankruptcy, did you own a business ployed in a trade, profession, or oth	o Any Business s or have any of the following col her activity, either full-time or par	
Give Details ithin 4 years before y A sole proprieto A member of a l A partner in a pa An officer, direct	ou filed for k or or self-emp imited liabilit artnership stor, or mana	our Business or Connections to bankruptcy, did you own a business bloyed in a trade, profession, or oth ty company (LLC) or limited liability	o Any Business s or have any of the following content of the following content of the full-time or party partnership (LLP)	
Give Detailed ithin 4 years before your A sole proprieto A member of a language An officer, direct An owner of at the solution of the solution	ou filed for k or or self-emp imited liabilit artnership ctor, or mana least 5% of th	pur Business or Connections to pankruptcy, did you own a business ployed in a trade, profession, or oth try company (LLC) or limited liability ging executive of a corporation me voting or equity securities of a c	o Any Business s or have any of the following content of the following content of the full-time or party partnership (LLP)	
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ithin 4 years before y A sole proprieto A member of a l A partner in a pa An officer, direct An owner of at l No. None of the abo Yes. Check all that	ou filed for k or or self-emp imited liabilit artnership ctor, or mana least 5% of th ove applies. (apply above	parkruptcy, did you own a business or connections to bankruptcy, did you own a business oloyed in a trade, profession, or off ty company (LLC) or limited liability ging executive of a corporation ne voting or equity securities of a corporation of the partre of the bases of the part of the bases of the partre o	o Any Business s or have any of the following content activity, either full-time or party partnership (LLP) corporation	
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ithin 4 years before y A sole proprieto A member of a l A partner in a pa An officer, direct An owner of at l No. None of the abo Yes. Check all that a Evangel Home Business Name	ou filed for ker or self-empimited liabilitiartnership etor, or mana least 5% of the execution of the execut	parkruptcy, did you own a business or connections to bankruptcy, did you own a business oloyed in a trade, profession, or off ty company (LLC) or limited liability ging executive of a corporation ne voting or equity securities of a corporation of the details below for each of the details below for each old of the details of the details below for each old of the details of	o Any Business s or have any of the following conher activity, either full-time or party partnership (LLP) corporation th business usiness Employed	er Identification number nclude Social Security number or ITIN.
Give Details ithin 4 years before y A sole proprieto A member of a l A partner in a pa An officer, direct An owner of at l No. None of the abo Yes. Check all that Evangel Home Business Name 2720 S. River F	ou filed for ker or self-empimited liabilitiartnership etor, or mana least 5% of the execution of the execut	parkruptcy, did you own a business or connections to bankruptcy, did you own a business oloyed in a trade, profession, or off try company (LLC) or limited liability ging executive of a corporation ne voting or equity securities of a corporation of the part 12. So to Part 12. Describe the nature of the boundary of the boundary of the boundary of the part 12.	o Any Business s or have any of the following conher activity, either full-time or party partnership (LLP) corporation th business usiness Employed	er Identification number nclude Social Security number or ITIN.
Give Details ithin 4 years before y A sole proprieto A member of a l A partner in a pa An officer, direct An owner of at l No. None of the abo Yes. Check all that a Evangel Home Business Name	ou filed for ker or self-empimited liabilitiartnership etor, or mana least 5% of the execution of the execut	parkruptcy, did you own a business or connections to bankruptcy, did you own a business oloyed in a trade, profession, or off try company (LLC) or limited liability ging executive of a corporation ne voting or equity securities of a corporation of the part 12. So to Part 12. Describe the nature of the boundary of the boundary of the boundary of the part 12.	o Any Business s or have any of the following conher activity, either full-time or party partnership (LLP) corporation th business usiness Employed Do not in	er Identification number nclude Social Security number or ITIN.
Give Details ithin 4 years before y A sole proprieto A member of a l A partner in a pa An officer, direct An owner of at l No. None of the abo Yes. Check all that Evangel Home Business Name 2720 S. River F	ou filed for to or or self-emp imited liabilit artnership stor, or mana least 5% of th ove applies. (apply above Health Ser	pankruptcy, did you own a business or connections to bankruptcy, did you own a business oloyed in a trade, profession, or off try company (LLC) or limited liability ging executive of a corporation ne voting or equity securities of a composition of the profession of the details below for each of the details below for each of the below have of the below Home Health Care	s or have any of the following conter activity, either full-time or party partnership (LLP) corporation th business Employe Do not in EIN:	er Identification number nclude Social Security number or ITIN.
Give Details ithin 4 years before y A sole proprieto A member of a l A partner in a pa An officer, direct An owner of at l No. None of the abo Yes. Check all that Evangel Home Business Name 2720 S. River F	ou filed for to or self-empimited liabilities artnership stor, or manaleast 5% of those applies. (apply above Health Ser	parkruptcy, did you own a business oloyed in a trade, profession, or other trade, profession, or other company (LLC) or limited liability ging executive of a corporation ne voting or equity securities of a composition of the part 12. and fill in the details below for each of the bound of t	s or have any of the following conter activity, either full-time or party partnership (LLP) corporation th business Employe Do not in EIN:	er Identification number nclude Social Security number or (TIN.
ithin 4 years before y A sole proprieto A member of a l A partner in a pa An officer, direct An owner of at l No. None of the abo Yes. Check all that: Evangel Home Business Name 2720 S. River F Number Street	ou filed for to or self-empimited liabilities artnership stor, or manaleast 5% of those applies. (apply above Health Ser	parkruptcy, did you own a business oloyed in a trade, profession, or other trade, profession, or other company (LLC) or limited liability ging executive of a corporation ne voting or equity securities of a composition of the profession of the details below for each old of the	s or have any of the following conter activity, either full-time or party partnership (LLP) corporation th business Employe Do not in EIN: From	t-time or identification number notude Social Security number or ITIN
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11: Give Details ithin 4 years before y A sole proprieto A member of a l A partner in a pa An officer, direct An owner of at l No. None of the above. Check all that a Evangel Home Business Name 2720 S. River F Number Street Des Plaines	ou filed for to or self-empimited liabilities artnership stor, or manaleast 5% of those applies. (apply above Health Ser	parkruptcy, did you own a business oloyed in a trade, profession, or other trade, profession, or other company (LLC) or limited liability ging executive of a corporation ne voting or equity securities of a composition of the profession of the details below for each old of the	s or have any of the following conher activity, either full-time or party partnership (LLP) corporation th business Employed Do not in EIN: From	t-time or identification number notude Social Security number or ITIN
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	Case number	Г (ії кломл)							
First Name Middle Name Last	Name								
	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN							
Business Name	- f	EIN: -							
Number Street	Name of accountant or bookkeeper	Dates business existed							
	- : :	· · _							
City State ZIP Code	. i	From To							
	The control of the second supplier of the second control of the second control of	to the control of the properties of the control of							
/ithin 2 years before you filed for bankruj astitutions, creditors, or other parties.] No] Yes. Fill in the detalls below.	ptcy, did you give a financial statement to anyone a	ibout your business? Include all financial							
	Date leaved								
Name	MM / DD / YYYY								
Number Street	-								
	_								
City State ZIP Code	•								
312: Sign Below									
I have read the answers on this Statemer answers are true and correct I understal in connection with a bankruptcy case ca	nt of Financial Affairs and any attachments, and I denote that making a false statement, concealing proper in result in fines up to \$250,000, or imprisonment for	rty, or obtaining money or property by frau							
I have read the answers on this Statemer answers are true and correct I understal in connection with a bankruptcy case ca	nd that making a false statement, concealing prope	rty, or obtaining money or property by frau							
have read the answers on this Statemer answers are true and correct I understal in connection with a bankruptcy case ca	nd that making a false statement, concealing prope in result in fines up to \$250,000, or imprisonment fo	rty, or obtaining money or property by frau							
I have read the answers on this Statemer answers are true and correct. I understain connection with a bankruptcy case ca 18 U.S.C. §§ 152, 1341, 1519, and 3571.	nd that making a false statement, concealing prope in result in fines up to \$250,000, or imprisonment fo	rty, or obtaining money or property by frau							
I have read the answers on this Statemer answers are true and correct. I understain connection with a bankruptcy case ca 18 U.S.C. §§ 152, 1341, 1519, and 3571. **Common Carill Signature of Debtor 1 Date 05/01/2018	nd that making a false statement, concealing prope in result in fines up to \$250,000, or imprisonment fo	rty, or obtaining money or property by frau or up to 20 years, or both.							
I have read the answers on this Statemers are true and correct. I understain connection with a bankruptcy case ca 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Date 05/01/2018 Did you attach additional pages to Your	nd that making a false statement, concealing prope in result in fines up to \$250,000, or imprisonment for \$250,000 and \$250,000. Signature of Debtor 2	rty, or obtaining money or property by frau or up to 20 years, or both.							
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I have read the answers on this Statemer answers are true and correct. I understal in connection with a bankruptcy case ca 18 U.S.C. §§ 152, 1341, 1519, and 3571. **Common Capill Signature of Debtor 1 Date 05/01/2018 Did you attach additional pages to Your and Yes	nd that making a false statement, concealing prope in result in fines up to \$250,000, or imprisonment for Signature of Debtor 2 Date	rty, or obtaining money or property by frau or up to 20 years, or both. for Bankruptcy (Official Form 107)?							

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Fill in this inf	ormation to ide	entify your case:		
Debtor 1	Hannah Cao)[Middie Name	Last Name	
D-44-40	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court f	or the: Northern District of Illinoi	s	
Case number			_	
(if known)				

Check if this is an amended filing

12/15

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C			
Creditor's name: Mercedes Beinz Financial	☐ Surrender the property.	□ No			
	 ✓ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. 				
Description of 2009 Mercedes C63 property securing debt:					
	Retain the property and [explain]:				
Creditor's name Arvest	☐ Surrender the property.				
Tigario.	☑ Retain the property and redeem it.	☑ Yes			
Description of property securing debt: Partlett IL	Retain the property and enter into a Reaffirmation Agreement.				
·	Retain the property and [explain]:				
Creditor's name: Glenview State Bank	☐ Surrender the property.	☑ No			
The state of the s	Retain the property and redeem it.	☐ Yes			
Description of property 2008 Mercedes GL 550 securing debt:	Retain the property and enter into a Reaffirmation Agreement.				
v	Retain the property and [explain]:				
Creditor's	☐ Surrender the property.	No			
name:	Retain the property and redeem it.	☐ Yes			
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.				
-	☐ Retain the property and [explain]:				

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Describe you	r unexpire	d persona	propert	y leases				·.				Wifi	the lease	be assum	ed?
Lessor's name	e :											ПN	٥		
Description of property:									about the control	ar a ration we had as		☐ Y	es		
Lessor's name	e:											□ N	0		
Description of property:				والمراجعة والمنافقة والمراجعة والمراجعة والمراجعة والمراجعة والمراجعة والمراجعة والمراجعة والمراجعة والمراجعة								_ □ Y	es		
Lessor's name	e:											□ N	0		
Description of property:	leased						***					□ Y	ės		
Lessor's name	3:	allerija vije prijatelj prijatičani aut i malikulikulena				er m. seets facur abstrac	rder Tot fa delived rich	SERVICE OF NATIONAL CONT.	a makenin was also desime a	P 14 STEPHENS 1-1-1 THE		ΠN	0	wales articula (APDA) bles Provide	
Description of property:	leased		• •			en e ur				. •	Programme Control	ΠY	es		
Lessor's name	3 :			gger mengig sah - disah Merisbih 1	derivate Various (Variant)	ini yan asala na furfusioa	THE STREET		er-eller en sederation	rasemon escal rosa		DΝ	0	MAAP LAN. / P., 162-181 0	
Description of property:	leased								1. 8. 11			. <u>.</u> .	es		
Lessor's name	3:		and the second	**************************************	er, een wesskerbroeft			~***	ONLEGATION AND A	· (1995) · (1995) · (1995) · (1995) · (1995)	yang ang ay Sandara Sandara Sandara	□N	0		
Description of property:	leased		•									□ Y	es		
Lessor's nam	e:							alaba i e Madilla Pierri billi - Palitti				□ N	0		
Description of property:	leased			r. 94.	~ .					- **-		□ Y	es		
Selection Control of the Control of Selection Contr	hydroff dil su Andrew is direct condit i Pa	g gar. Yegunga, garbiga iya kira ana Barabika ab		namus Anna a Van eel Paladele sufficiel a											
t 3: Sigr	Below										<u></u>				

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B2030 (Form 2030) (12/15)

In re HANNAH CADILI Case No. Debtor DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR 1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: 2. The source of the compensation paid to me was: Debtor U Other (specify) The source of compensation to be paid to me is: U Other (specify) Debtor I have not agreed to share the above-disclosed compensation with any other person unless they are 4. members and associates of my law firm. I have agreed to share the above-disclosed compensation with a other person or persons who are not

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

people sharing in the compensation, is attached.

a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;

members or associates of my law firm. A copy of the agreement, together with a list of the names of the

- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

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B2030 (Form 2030) (12/15)

- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed]

NONE

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

SEE #5

CERTIFICATION
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.
Date Signature of Attorney LAW OFFICES OF VINCE VANNER
Name of law firm